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# THERAPEUTIC GUIDE;

THE

MOST IMPORTANT RESULTS

OF MORE THAN

# FORTY YEARS' PRACTICE,

WITH

PERSONAL OBSERVATIONS REGARDING THE TRULY-RELIABLE AND PRACTICALLY-VERIFIED CURATIVE INDICATIONS IN ACTUAL CASES OF DISEASE.

BY

**Doctor G. H. G. JAHR, Chevalier, etc.**

TRANSLATED,

WITH NOTES AND NEW REMEDIES,

BY

CHARLES J. HEMPEL, M. D.

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# PREFATORY REMARKS BY THE EDITOR.

ALTHOUGH this volume was intended for beginners in Homœopathy, yet it will likewise prove an acceptable guide to physicians of riper experience. It will certainly assist them in refreshing their memory and facilitating their meanderings through the mazes of our Materia Medica. Moreover it is delightful to deal with a man like JAHR in the midst of the materialistic tendencies not only of our Age, but even of the Homœopathic School. JAHR is not an extremist in the matter of doses; but he holds fast to what HAHNEMANN taught and practised in this respect; and, although it is our own conviction that a departure from HAHNEMANN'S infinitesimals may in many cases prove a blessing to our patients; yet, on the other hand, we would say to our colleagues, and especially to our younger colleagues: Never spurn the practical wisdom bequeathed to us by HAHNEMANN in the matter of doses, and do not confound the materialism of this Age with scientific progress.

CHARLES J. HEMPEL.

GRAND RAPIDS, MAY, 1869.

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General remark.

# PREFACE.

It was in the year 1827 when I made my debut in the practice of Homœopathy, at a time when the only resources at our command were the Materia Medica Pura of the founder of our school and a few cures reported in *Stapf's* "*Archiv*," and in the "*Praktischen Mittheilungen*" (Practical Communications.) With these scanty means we had to get along as well as we could, and, by a diligent and attentive study of the drugs with whose pathogeneses we had become acquainted at that time, familiarize ourselves with the characteristic symptoms of each drug and its special indications, in order to avail ourselves of them for therapeutic purposes in such cases as might present themselves for treatment. This was no small task, which could never have been accomplished, if the Materia Medica of that time had contained the large number of drugs that are offered at the present time to the beginner in homœopathic practice. But since the number of drugs known at that time, did not exceed sixty, and among these only twenty had been proved with exhaustive perseverance and correctness, we had it in our power to study them thoroughly without too much trouble; to become fully acquainted with the specific effects of each drug and, without as yet knowing in what specially *named* pathological diseases they might be used as curative agents, to apply them as such in accordance with their symptomatic indications. By pursuing this course we enjoyed the great advantage of having our attention directed to that which is above every thing else needful in the selection of a remedy, namely to select it not so much according to the general pathognomonic and diagnostic, as in accordance with the special symptoms which are *exclusively peculiar to each individual case.* Of the

success with which these therapeutic proceedings were crowned, the numerous cures which were effected at that time and reported in the periodicals of our school, furnish the most incontrovertible testimony, which is so much more striking as these cures constitute without contradiction some of the most brilliant clinical achievements we possess.

At this time such a careful study of our Materia Medica is unfortunately no longer possible to the beginner in Homœopathy. Overwhelmed by the accumulated mass of drugs and clinical observations, he scarcely knows which way to turn for at least one ray of light in the chaos spread out before him, and, instead of singling out a few remedies from Hahnemann's Materia Medica Pura for his particular study, he prefers having recourse to some *Clinical Guide* or *Repertory*, where he can pick out what he requires for the time being. It is indeed true that this course would not be the worst expedient among those that necessity seems to have rendered indispensable, provided these Repertories and Guides did not, for the sake of completeness and in order to satisfy the wants of all, embody a great many details that could not be kept from the experienced practitioner, to whom they might be like so many sign-posts in the field of practice; whereas they could not fail to confound the beginner, who does not always know how to distinguish the truly characteristic and essential from the accidental and non-essential, and whose perplexity increases in proportion as the Repertory which he consults is more complete. In addition to this, the cured symptoms in works like Rueckert's "Klinischen Erfahrungen" (Clinical Cases), and my own "Klinischen Anweisungen" (Clinical Instructions), especially if this or that remedy had only effected *one* or at most *two* cures, had to be stated as they were found; and whereas I was enabled in my own "Klinischen Anweisungen" to sift the symptomatic material in the case of remedies that had been thoroughly proved and practically applied in a variety of cases, and only to mention the symptoms that might be regarded as truly *essential indications:* yet there were, on the other hand, many symptoms which it was my duty, as an impartial reporter, to transfer to my work as I found them, not knowing whether the reported symptoms were essential to the correct selection of a remedial agent or constituted exceedingly unessential indications. On looking in Rueckert's "Klinischen Erfahrungen" at the sources from which, in addition to my *own*

practical observations, I had drawn, some twenty years ago, the material for my "Klinishen Anweisungen," experienced practitioners and physicians generally who possess a thorough knowledge of the Materia Medica Pura, must have noticed that Rueckert's extensive work which has been compiled with the most scrupulous conscientiousness, contains a vast number of cases whose symptoms, as reported, are so little characteristic, that any other remedy, being only remotely similar to these symptoms, might, according to all appearances, have effected a cure just as well as the remedy that really did cure the case. But if, in a case of this kind, the recorded symptoms do not contain those that are truly characteristic, it may easily happen that a beginner, who is exclusively guided by these symptoms in the selection of his remedy, may find himself disappointed in his expectations in spite of the correctness of his observations; and, if such general symptoms are collated in the "*Uebersichten*" or Compilations, General Records or lists of symptoms, the unpracticed beginner is deprived of all reliable support. In addition to this it must be observed that Rueckert has embodied in his Collection theoretical notices from various systems of homœopathic therapeutics, which are not always based upon clinical experience, but very frequently upon nothing but inferences from the Materia Medica Pura; yet all such speculative symptoms are likewise contained in the "Rueckblicken" or Retrospects. In the case of such symptoms as have been taken from Hartmann's Therapeutics, this defect is of not much importance, for the reason that he possessed an exquisite knowledge of the Materia Medica Pura and although his advice often emanated from his closet, yet he often hit most beautifully the right remedy, as has been confirmed by experience, whereas some of the remedies he proposes have not yet been verified by practice, and therefore have not yet been invested with the dignity of clinical acquisitions.

In my *own* "Klinischen Anweisungen" (Clinical Instructions), I have indeed endeavored to steer clear of this cliff, on which every not strictly critical reporter must strand the more certainly the more conscientiously he seeks to fulfil his task; I have examined and tested, as has already been stated, all the *cured* symptoms by the light of my own experience as well as by that of the Materia Medica Pura, and have only received such of them as my practical and theoretical knowledge of the remedies pointed out to me as

reliable therapeutic *indications;* on the other hand, as has likewise been already stated, inasmuch as I had to receive among my records of cases many whose authenticity could not well be doubted; although they did not present any *characteristic* features or symptomatic indications; and although it was indeed my privilege, in my *free* compilations, to leave out *unnecessary* symptoms, but not to supply at my pleasure truly-characteristic symptoms where no mention was made of them in the original record: many statements have slipped into my "Clinical Instructions," which, although perfectly correct *of themselves* and even of great importance in many cases where no known remedy will help, embarrass the beginner rather than aid him in his practice. In relating pathological phenomena in connection with the various remedies that are adapted to them, I have, it is true, likewise been guided, in giving prominence to the most important facts, by my practical experience as well as by my knowledge of the Materia Medica Pura; but, since, even in such a case, I had to admit statements vouched for by *other* authorities, I found myself unable to characterize my selections as rigidly as I would have liked. Nevertheless I do not wish to be understood as insinuating that I am not perfectly agreed with myself regarding the character of my own work. Not at all! On the contrary it is my belief that we ought to have books like Rueckert's "Klinische Erfahrungen," from which even a physician who has grown gray in the practice of medicine, may still derive advice or suggestions; if all our variously-tried remedies should leave him in the lurch; it is for beginners, especially such of them as have not yet acquired by their own efforts a knowledge of the characteristic effects of our drugs, that such extensive works are no more appropriate than Freund's Latin Dictionary is for a sophomore.

This inconvenience, which became so much more evident to me, the more opportunities I had of conversing with beginners in Homœopathy, is the reason which has induced me to offer the present work to the public as a "*Guide for Beginners,*" where I only indicate the most important and decisive points for the selection of a remedy; and where I do not offer any thing but what my own individual experience, during a practice of forty years, has enabled me to verify as *absolutely decisive* in choosing the proper remedy. Of course this book cannot, nor is it intended to be, a guide in all cases, like my "*Klinischen Anweisungen*" (Clinical

Instructions); as a therapeutic guide for beginners, I flatter myself, however, that it will be a really-useful work, since the correctness of what it contains, has been verified by me in a variety of cases, and no one will be misled by appropriating such contents in the treatment of disease. After the beginner has once mastered what I offer him in this work, he may then proceed onward to the study of my "*Clinical Instructions.*" My indications for the selection of remedies, in the subsequent pages, have likewise been presented with great conciseness, for it is my belief that, if the truly-characteristic symptoms of a case are fully covered by the corresponding pathogenetic symptoms of the remedy, the remaining minor symptoms are of very little consequence; and to enable the beginner to obtain a knowledge of these *indications*, has been my chief endeavor in the subsequent articles. The reader will easily comprehend that, in carrying out this plan, I had rigidly to exclude all cases concerning which I had no experience *of my own* to offer; he will miss them so much less in this place since he is at liberty, in case my own experience should not satisfy him, to consult my "*Klinischen Anweisungen*" (Clinical Instructions) for additional advice. At first, however, he will do well to content himself with a few facts and to impress them deeply on his memory.

I ought to call attention to the fact that all cures, an abstract of which is reported in this work, have been achieved with the 30th attenuation, unless some other attenuation is expressly mentioned; I either gave two globules dry on the tongue, once, twice or three times, or the same number of globules dissolved in water. At the present time my general rule is to resort to watery solutions only in acute febrile inflammations of internal organs, and even then, only until the fever is subdued, whereas in all other cases, after repeatedly trying Hahnemann's method as well as that of his opponents in a variety of diseases, I have fallen back upon the globules, and have become firmly convinced that, if two globules dry upon the tongue, do not effect the least improvement in a proportionably short space of time, to be measured by the intensity or the protracted course of the disease, the want of success is not to be imputed to the smallness of the dose, but to the inappropriateness of the remedy. During the Cholera of 1849, when I was in the habit of treating the well-known precursory diarrhœa with two globules of *Veratrum* 12, dissolved in a cupful of water, of which solution a tea-spoonful was to be taken after every evacuation, I

gave one of my patients, who was tolerably familiar with Homœopathy, a vialful of such globules, with instructions to use it for himself and his family in the manner above indicated. He was the first who had to make use of this vial; for one morning, while attending to his business in the city, he was violently attacked by this premonitory diarrhœa. Not having his vial with him, and being too far from his home, he obtained *Veratrum* 12, in the nearest Homœopathic pharmacy, and immediately took two globules dry on the tongue, with the intention of repeating the dose, if another attack should take place. These globules had scarcely melted on his tongue when the urging which he still felt, abated, so that, when evening set in, he had not only had no discharge from his bowels, but not even an intimation that his bowels would be moved. He witnessed the same result in similar cases not only in his own family, but likewise among his friends to whom, if he chanced to hear of their being attacked by this ominous diarrhœa, he gave two globules of *Veratrum* dry on the tongue, and afterwards learned from most of them that to their amazement the diarrhœa stopped after the globules had been taken. Instructed by this result I likewise ordered all my patients to take the globules dry, and a single dose was sufficient in almost every case. Another case was still more remarkable. A plain woman, who had consulted me on account of this diarrhœa and had it arrested at once by two globules of *Veratrum* 12, had two days afterwards committed the indiscretion of eating a quantity of cucumber-salad, after which she was not only attacked with a violent diarrhœa but likewise with severe vomiting. Residing at some distance from my office, she sent for one of my colleagues, who gave her first *Cuprum* and afterwards *Arsenicum*, a few drops of one of the lower attenuations, without effecting the least change for the better. For this reason she again sent for me in the greatest hurry. On my arrival I found her attacked with true cholera; she had rice-water evacuations by the rectum and mouth, the pulse was collapsed and she was tormented by an inconceivable nervous excitement which, according to her statement, set in after she took the last medicine (*Arsen.*). After examining all her symptoms I made up my mind that *Veratrum* was still indicated as the most appropriate remedy. I intended to give her *Veratrum* in solution, but not being able to obtain any pure water in the house, which was a wretched dwelling, I placed two globules of this medicine dry upon her tongue,

leaving at the same time a prescription of two globules of *Veratrum* 12, to be dissolved in water by the apothecary, of which solution she was to take a tea-spoonful every half hour. On my second visit, four hours later, the prescription had not yet been sent back by the apothecary because the poor women had not been able to obtain a messenger who would carry it for her to the apothecary; in the meanwhile, however, a remarkable improvement had taken place in her condition, the pulse had returned, the countenance had resumed a more natural expression, the vomiting had ceased, the skin was warmer and the rice-water discharges had changed to a brown, watery diarrhœa. By way of precaution I directed her to take the medicine I had prescribed as soon as she should receive it, until the next morning, a tea-spoonful every two hours. Next morning her health was fully restored, without any critical change having taken place.

Except in acute *febrile inflammations* of internal organs, I have thus in all cases where the remedy was really adapted to the disease, even in the most violent attacks of spasms, diarrhœa, vomiting, hœmorrhages, etc., obtained in the latter as well as at any former period of my practice, a favorable change in the symptoms much more speedily by means of two globules dry on the tongue than by means of spoonful doses of a watery solution. This may perhaps be owing to the fact that in prescribing globules, the medicine being more concentrated in one point, is conducted by the absorbents of the tongue immediately into the circulation, and, by virtue of the law of similarity, is brought in contact with the starting-point of the disease; whereas, when given in a more diffused form, especially if the medicine is at the same time introduced into the stomach, its powers are more easily scattered and made to act upon other affiliated parts, on which account the curative process may be disturbed and retarded in a manner that may not be strikingly perceptible to the senses. Be this as it may, I consider the use of GLOBULES in a single dose, with very few well-defined exceptions, a method of practice that cannot be sufficiently commended, of whose advantages any one who is willing to try it and knows *how to select the appropriate remedy*, can easily convince himself by actual experience. Even in cases where practitioners, who are the most conversant with our Materia Medica, sometimes hesitate between two or three remedies, the method of prescribing globules has the advantage, in

cases where the remedy had been improperly chosen but administered in a single dose, of enabling the physican to give another remedy with much less loss of time and with more certainty of success, than in cases where the former medicine, having been given in repeated doses, must necessarily mingle its effects with the action of the new medicine, whose influence is thus greatly interfered with. Moreover it should be remembered that if, with the exception of a few cases, two or three globules do not effect the least favorable change in the condition of the patient within a proportionably requisite period of time, two or three globules of a better-chosen remedy will do more good than stronger and more frequently-repeated doses of the former. One of the most striking evidences of the truth of my doctrine occurred to me quite recently in the case of a man who was in the habit of treating himself, and who, on a rather cold day was suddenly attacked with a very violent, at first painless diarrhœa. Thinking he had taken cold, he first took a dose of *Dulcamara*, which had no effect and even brought on undigested stools, after which he took *China*, then *Phosphorus*, and lastly *Bryonia* with the same bad result, since all he accomplished was to bring about a change in the appearance of the stools, the violence of the diarrhœa remaining the same. Fancying, however, he had noticed a favorable change after *Phosphorus*, which had removed the undigested substances from the stools, he laid his want of success to the smallness of the dose, and consequently took *Phosphorus* in larger, more frequently-repeated doses, without accomplishing any other change, than a return of the undigested particles of food in the stools. Another dose of *China* removed this symptom very speedily, but having been taken in larger and more frequently-repeated doses, it made the diarrhœa still worse by complicating it with a troublesome flatulence. He now sent for me, and on my arrival had another passage that spirted out with great force and a good deal of flatulence, had a very foul odor, and in color and consistence, had altogether the appearance of *fermented yeast.* This character of the evacuation, together with the previous use of *China*, decided me at once and unhesitatingly to give *Ipecacuanha* 30th, two globules dry on the tongue, accompanied with a request not to take any other medicine without my advice. The gentleman being a friend of mine, I spent the evening in his family. Already, one hour after taking the medicine, he said to me:

"I believe, Doctor, you have hit the right remedy, my bowels feel better than they have done for the last ten days." My friend was right. His diarrhœa stopped from the time he took the *Ipecacuanha*, and was succeeded by a constipation, lasting three days, at which he was much rejoiced. This shows that a single dose of the correctly-chosen remedy is often sufficient to effect a cure, and that an inappropriately selected medicine, will not cure even if it is taken in strong and frequently repeated doses.

How long we ought to wait to be satisfied of the specific appropriateness of the remedy, is a very difficult matter to decide, since this point depends upon the intensity of the disease and its consequent danger, and upon the physician's capacity to discern the first signs of an incipient improvement. In sudden attacks of very violent pains, or in other more or less dangerous affections that cannot well continue one or two days with equal intensity without prostrating the patient entirely, I sometimes do not wait three hours or even less; and in sudden attacks of toothache, colic or abdominal spasms where, if they are violent, I sometimes resort to *olfaction*, I often change the remedy in half an hour. I may mention the case of a girl who, in consequence of a bitter and mortifying insult to her feelings during the catamenia, was attacked with violent abdominal spasms, during which she cried, moaned and fairly howled with pain. The cause of the attack induced me to let her smell of my vial with Ignatia-globules, and I remained to await the result. Half an hour after, the pain, so far from being relieved, having rather increased in intensity, (which is scarcely ever the case in such violent attacks without any simultaneous indications of an approaching amelioration, provided the medicine is administered by *olfaction*,) I gave her *Cocculus* 30th to smell of. Already ten minutes after smelling of this remedy, she began to grow more quiet, the spasms gradually abated and, before another half hour had passed by, she fell into a sound sleep which, as I learned on my next visit, lasted three hours and from which she woke perfectly free from pain and not only remained so, but her usually profuse catamenia, which had only been diminished but not entirely suspended during the attack, continued to flow as freely and profusely as before. I pursue the same plan in sudden and *violent* attacks of toothache, where, following the advice of our honored Colleague, Doctor Landsmann, of Geneva, I sometimes do not wait ten minutes before giving another remedy if the

former does not afford immediate relief and, by pursuing this course, am enabled to my great joy to dismiss the patients free from all pain in thirty to forty-five minutes. The case is of course different if such neuralgic attacks have continued for weeks. In such cases I do not resort to *olfaction* but place two globules dry upon the tongue, awaiting the result at least twenty-four hours, as I do in all not very violent acute diseases. In truly *chronic* affections on the contrary, where I always give two or three doses of two globules each, at intervals of two to four days, I never decide upon a change under any circumstances before the termination of the third week, quietly watching every apparent aggravation, especially if I discover in it symptoms of the remedy the patient had been taking, until I have satisfied myself of its true course and character of the aggravation and if, after the termination of the third week, I do not perceive any signs of improvement, I give another remedy. But if the appropriate remedy had been given, the attentive eye of the skilful observer will sometimes perceive even in a case of this kind the first symptoms of an incipient improvement in the first week of the treatment, which may be followed by another apparent improvement for three or five days; if now the physician can prevail upon himself not to be too hasty in changing his prescription, he often succeeds in effecting marvelous cures with two to six globules of the same remedy. For the purpose of illustrating my statement by *one* example, I will state the case of a man who had crude pulmonary tubercles and was constantly suffering with spasmodic asthma, to whom I gave *Kali-carbonicum* with tolerable success, which remedy, when the symptoms got worse again eight days after the improvement had first commenced, I exchanged for some other medicine. Before he came under my treatment, he had taken several homœopathic remedies in Italy, his native country, and I had been giving him for the last nine months a variety of homœopathic remedies without any result, when I determined to again have recourse to *Kali*, but this time not as formerly in *three*, but in *one* dose of two globules of the thirtieth attenuation. Already on the third day after taking this medicine, his asthmatic paroxysms had abated, which abatement continued until the ninth day, when the paroxysms returned again with increased violence. Instead of changing the medicine, I now gave him *Saccharum lactis*. About the third week they again commenced to decrease and under the

exhibition of these sham-powders the improvement continued until the ninth week, when another aggravation set in, which it was my purpose to watch for eight days before deciding in favor of some other remedy. After the lapse of eight days the patient was again better than ever; during these eight days he had not had a single paroxysm of asthma, nor had he another attack during the eighteen months that he continued under my treatment, notwithstanding his tubercles still existed. The beats of the heart that had previously been very tumultuous and irregular, had likewise returned to the normal standard. From my long practice I might relate more than a hundred of such cases where *one* dose of a *single* remedy achieved a finer result in the space of two months than twenty impatiently-administered drugs in two or three years. Observation, however, has shown to a certainty that *in chronic diseases, where one remedy alone is capable of achieving the whole cure,* SLIGHT SYMPTOMS OF AN INCIPIENT IMPROVEMENT WILL, *according to my observations,* SHOW THEMSELVES IN THE FIRST WEEK OR IN THE FIRST FORTNIGHT, *and if these preliminary symptoms do set in, the physician cannot watch subsequent aggravations with too much care, unless he means to spoil every thing by the premature exhibition of another remedy.* On the other hand it is likewise an established fact that, *where even the discriminating eye of the most careful observer does not even perceive the slightest signs of a beginning improvement in fifteen or twenty days after the exhibition of a remedy in chronic diseases,* NOTHING BETTER CAN BE EXPECTED OF THIS DRUG, *and some other remedy will have to be chosen.*

If these observations are to be made with sufficient correctness, it is much better to adopt the advice Hahnemann gave in the commencement of his practice, and which his first disciples followed without an exception for upwards of twenty years, until the advent of the Specificists in the Homœopathic School, namely: to administer the remedy in *one* dose, or, in chronic diseases, at most in three doses, which, being given in rapid succession, at intervals of two or four days, were intended to represent *one* dose, and then to watch the result of this treatment; I say it is much better to follow this course than to order several doses at once, to be taken in water. The best cures which I have ever performed and am still performing, have been achieved with such doses, which I prefer to any other method of exhibiting remedies in chronic diseases as well as in acute, non-febrile affections. Even in febrile

inflammations of internal organs, after having subdued the fever and the intensity of the inflammation by means of watery solution of *Aconite* or of some other suitable remedy, of which solution I never give more than a tea-spoonful at a dose, which has sufficed in my hands to cure the worst kind of inflammations, I prescribe for the remaining morbid symptoms, a single dose dry on the tongue. After giving two globules of *Mercurius* 30th, in accordance with this rule, I have seen the pus which had accumulated after a severe attack of peritonitis, evacuated by the rectum, not to mention a number of other similar cases. Our art is and will always remain *an art of observation* which has for its object, not only to investigate the effect of drugs upon persons in health, but likewise to examine the condition of the patient in every individual case in all its aspects, and, after administering the proper remedy, to *examine him again*, in order to find out what further course the disease will take. To proceed with our patients as old-school physicians do with theirs, after giving them an emetic or a purgative, and afterwards inquiring whether they have vomited or purged in order to give them without further ado a more powerful emetic or purgative, in case the former should not have had any effect, is absolutely impossible, if we mean to accomplish by means of Homœopathy whatever this art is capable of achieving. For if a physician is ever so well acquainted with the remedies at his command, all he can do in spite of the most minute investigation of his patient's case, and of the most careful selection of the remedy, is to *hope* that the right remedy has been found; he cannot positively *know* this until he sees what effect the remedy produces. There is no more certain way, in order to find this out as speedily and unmistakably as possible for the purpose of giving another remedy without any loss of time, than to give only *one* dose of the remedy by way of trial and afterwards to observe and watch the patient still further, in order to satisfy ourselves whether we have entered upon a road that we can pursue further without hesitation and with perfect confidence. For this reason I am not by any means in favor of the a priori alternation of drugs; it is true I have seen excellent results obtained by my Colleagues by this method, but I have always asked myself whether they would not have reached their object more speedily by giving first the most suitable remedy by itself and after this remedy had exhausted its good effects, administering the other remedy for the re-

maining symptoms. The violence of febrile inflammations where *Aconite* corresponds to the fever, is certainly more speedily subdued if the *Aconite* is given without alternation with another remedy; even if it should seem as though this alternate use of two drugs would lead to the desired end with equal promptitude, yet such a proceeding renders all rigidly-correct observations impossible. In corroboration of this statement, I remind the reader of Dr. Kallenbach's observation, who gave his diphtheria-patients, when this epidemic first broke out at the Hague, *Apis* and *Lachesis* in alternation, but who afterwards, when he wished to find out which of these two remedies really effected the cure, saw those of his patients to whom he gave *Apis* alone, recover in three days instead of five, whereas those who received *Lachesis* alone, did not improve at all. As for my part I have never approved of the alternate use of two remedies, but have always got along best by watching the effect of one of the two concurrent remedies, before giving the other, and I recommend this course to all those who wish to make real progress in the difficult art of always selecting the right remedy.

I shall afterwards have occasion, on treating of different diseases in the course of this work, to relate various other cases, although I have made it a general rule, in order not to extend the size of this work beyond measure, to confine myself to a bare mention of the results which I have been able to abstract from positive indications for the choice of remedies, so much more as I have likewise learned from experience that an indiscriminate mass of reports of cures, from which no definite results can be drawn, tend to embarrass the reader rather than to guide him correctly. The compilations which Rueckert has so industriously made in his "*Klinischen Erfahrungen*," of every thing that has up to this time been printed in our school concerning the treatment of diseases, are in many respects of incalculable value, and I myself very often consult them with great advantage. But on looking at the articles "typhus, intermittent fever, cholera, influenza, pneumonia, pulmonary phthisis," I must confess that, if I had no experience of my own in these diseases, the multitude of remarks accumulated in those articles, would unsettle my mind rather than enlighten it on the *safest course* which I finally would have to pursue if I should be called upon to treat a case of one of the above-mentioned diseases, all of which can be stated in less pretentious compen-

diums for the benefit of beginners, in fewer words and in a more concise and practical manner. For all that, single cases the symptoms of which point strikingly to some definite remedy, have their specific value, and for this reason I have recorded them here and there, in the body of this work, whenever it seemed to me proper to do so, as I have done in this preface. In general, however, I have endeavored as I said above, to present to the beginning practitioner in the *shortest possible statements* and as a means of facilitating the treatment, what my *own experience* has confirmed to me as *safe and reliable* indications for the selection of a remedial agent. Where the nature of the case has seemed to require it; for instance on the occasion of Pomerais' notes on Apoplexy in Rueckert, I have called attention to several very unsafe authors mentioned in those notes and who are at the same time very unreliable practitioners, in order to caution everybody against receiving these notes which had been accepted by these authors, or any other imperfectly and superficially-observed facts, as current coin. In doing this I believe I have done many of the readers of Rueckert's otherwise meritorious work, and even Rueckert himself a real service, for the reason that neither he nor many of his readers could possibly know what I do, and, if he meant to be a faithful compiler, could not leave out any thing of what had been published as a clinical fact or observation. It is true that many of the essays which appear more particularly in England and France under very obscure names, should be mistrusted, because many of such publications are not written for the sake of the science but for the public eye, with the sole intention of winning for young physicians who had been unknown heretofore, a sort of name before the people. If they afterwards learn that some foreign author who happened to catch a glimpse of their advertising dodge, had quoted them as authorities in the homœopathic school, they are not a little surprised at this, since they themselves had had no further thought of their literary achievement. The case is different in regard to our acknowledged, strictly-scientific homœopathic journals. If we meet with a name in these journals that had been unknown to fame heretofore, yet the serious characters of the publication that had received this contribution and the editor's right to criticise it, as well as the impending judgment of the scientific readers of the journal are a guarantee that this hitherto-unknown author offers a serious article and not a tissue of downright inven-

tions or frivolous patchwork, and that he can be trusted as a man of honor and sober sense. In this manner I have never transferred any thing to my works from other sources without first passing a sort of external criticism upon it; nor have I ever accepted anything from any body whose scientific education had not previously been known to me either through his former serious writings, or through his contributions to serious periodicals, no matter what such a person might have done for the edification of his clients by the publication of large or small popular essays. In the present work I go a step further, publishing nothing the correctness of which I have not verified by *personal observation* beyond the possibility of contradiction, trusting that in this manner the little work which I here present to the public, will be found, if not a sufficient, at least an easily-comprehended and reliable guide for beginners.

I must add, however, that, let a compendium be as complete and circumstantial as it may, not all its indications can lead the beginner safely to the desired end, if he neglects to compare the two or three remedies, concerning which he is in doubt, with reference to the totality of their physiological effects, with a view of ascertaining which of these remedies is best suited to the general condition of the patient. For although two or three characteristic symptoms, as for instance for *Bryonia*, the *hot summer*, the *partaking of fruit*, and the *undigested particles of food in the stools*, are sometimes sufficient to point to this medicine as by far the best remedy for any kind of diarrhœa arising from one of these exciting causes; yet this remedy, in case the patient should not have partaken of fruit, would at once find a competitor in *Dulcamara*, and since the color and consistence of the evacuations are not often sufficient to decide the choice, the true remedy could only be determined by a comparison of all the *pathogenetic* symptoms of both drugs with the whole series of the pathological symptoms of the patient. What this little work is intended to accomplish is simply to guide the beginner as speedily as possible to the two or three drugs which, being the best remedies in the case before him, he will necessarily have to compare in the Materia Medica Pura, or in the absence of such a work, in my *Symptomen-Codex*, and such a comparison is easily accomplished. This course is pursued by myself provided the known characteristic symptoms of the drugs do not leave the selection doubtful, calling for a choice between a

larger number; by this means I generally very soon find the right remedy or at least one that is very near it, and having thus hit upon two or three remedies that are closely related to the case, the second remedy, if the first should prove unsuccessful, very often shows a curative effect in recent diseases. At the same time, if new symptoms should become developed, especially in chronic diseases or in diseases of a more than usually protracted duration, I never fail to institute a new comparison of the physiological symptoms of the remedy I had administered, in order to determine whether the new symptoms belong to the remedy or are due to the gradual increase of the disease. It very often happens that owing to the smallness of the dose which I am in the habit of administering, such new symptoms do not occur, indeed, scarcely ever in acute diseases where the remedies do not act so long, but sometimes in chronic affections, where I witnessed for instance, in the case of a young man to whom I had given two globules of *Silic.* 30, about a fortnight after he had taken this medicine, a sudden outbreak of boils, transitory attacks of nyctalopia and water-brash. These symptoms, which caused the young man, who had never experienced them before, a good deal of anxiety, being all contained in the pathogenesis of Silicea, I determined to antidote them by means of *Hepar sulph.*, which I decided upon giving, not only because *Silicea* was an improperly-chosen remedy, but because it had not diminished in the least the nocturnal emissions for which it had been administered, and in less than three days these Silicea symptoms disappeared and the excessive emissions ceased entirely. It is true that in chronic affections, if the remedy corresponds perfectly with, and improves the symptoms of the disease, these physiological accessory symptoms become much less frequently manifest than in cases where the remedy is incorrectly chosen; for this very reason it becomes so much more necessary to compare these new symptoms with the physiological symptoms of the remedy that had been administered, since in such a case the antidote of this new remedy, or some other medicine that is specially adapted to the new symptoms, may remove the latter together with a considerable portion of the original malady. But in chronic affections, even if the remedy had not been badly-chosen, and indeed removes a portion of the symptoms, it often happens that, after the patient's condition had again become stationary, a few new symptoms show themselves that may in some respects be

attributable to the medicine, but in other respects are inherent in the patient's condition, being perhaps old, long-forgotten complaints which the remedy, that otherwise had had a very good effect, had again called into being. These symptoms are sometimes of great importance, and if, among the remedies adapted to the original disease, one can be found the characteristic effects of which likewise correspond to these recently-developed symptoms, this remedy will greatly advance the cure. Some time ago I treated a man aged forty years, for some chronic liver-complaint. *Lycopodium* agreed so well with him from the commencement that not paying any attention to the apparent aggravations which occurred at most every four or five days, I allowed the remedy to act undisturbedly for about nine weeks, during which time the liver-complaint gradually diminished and finally almost disappeared altogether. Towards the end of the ninth week the liver-complaint remained stationary and the patient was suddenly attacked with an excessive evening-fear attended with a tendency to start; the fear seemed to be located in the pit of the stomach, where it sometimes manifested itself like shocks, and was so much more disagreeable to the patient, since, as he told me, he had had a similar attack years ago. I gave him *Calcarea*, when behold, this remedy not only removed the fear which *Lycopodium* had re-excited, but likewise the remnant of the old liver-complaint for upwards of two years.

While I am jotting down these remarks, I already hear at a distance the lamentations, which certain innovators who are very well acquainted with their own closet-homœopathy, but not by any means with the true, *saving* Homœopathy of Hahnemann, will utter over me as a man of darkness and retrograding conservatism. But is it a real progress to drench patients with large quantities of medicine in accordance with general pathological indications, without effecting a cure; instead of selecting a remedy in accordance with special indications, so that even the smallest dose, whose physiological effects are not felt by the patient, greatly advances his cure? Is it a real progress to order a new remedy for years, every eight days or a fortnight; if the former remedy does not remove every symptom at once as by magic, instead of ascertaining by a careful comparison of all the symptoms, whether the first remedy had not in these eight days or this fortnight effected a partial improvement, and, after this improvement and the curative

energies of the organism had once been excited into action, watching this newly-awakened reaction with the utmost care and allowing it to continue undisturbed by new doses, or by other remedies, to the end, even if it should continue for nine weeks or even nine months? Any one who, following the rules which I have laid down in this work, and depending for his final decision upon the physiological effects of our drugs, will try a single dose in globules in all cases where a stronger dose has not been expressly indicated, subject, however, to the rules regarding observation, management and selection, that have been abundantly discussed in previous paragraphs, will soon find out which is right, old Hahnemann, who first taught us those rules, or his modern innovators, many of whom are unfortunately much better versed in writing and criticizing than in performing genuine cures. Would that this trial were made by a large number, and that among the new beginners in Homœopathy many were raised up again of the stamp of Hahnemann's old disciples.

THE AUTHOR.

*Paris, June,* 1868.

## CHAPTER I.

### MENTAL AND PSYCHICAL DERANGEMENTS.

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However great may be the success Homœopathy can boast of in *acute* diseases of this kind, this experience does not extend to inveterate chronic cases, that bid defiance to *our* art, as they do to any other kind of medical treatment. If the parents of such a patient had been affected with a similar derangement, there is not the slightest hope of a radical cure. I have had several cases of this kind under treatment, but the most I have been able to accomplish was that, although the dementia *was not cured*, yet the patients enjoyed longer intervals of rationality, and that, in cases of *intermittent* dementia, the rational intervals which the patients had formerly enjoyed, were of longer duration. A remarkable case of this kind was that of a young man of twenty-six years, who was endowed by nature with fair mental abilities and likewise possessed a tolerable scientific education. His mother and uncle, whose intellectual powers were likewise uncommonly bright, were both affected with an unmistakable streak of insanity. One day he was suddenly attacked with raging mania which, having been subdued under allopathic treatment, had left him at the time when he came under my treatment, for two years afflicted with an unceasing, quiet dementia characterized by a habit of praying, a taciturn mood and staring and sunken looks. All his ordinary acts, such as drinking, eating, sleeping etc. were performed with regularity; he dressed carelessly, but at the regular hours when the rest of the family dressed, took his meals with them, but stared unceasingly in front of him, with his hands folded except when he had to use them for the performance of bodily functions; all he said when asked a question or otherwise spoken to, was *yea* or *nay*. From this condition. in which, as I said be-

fore, he had now been living unceasingly for two years, I relieved him to some extent by means of *Ignat.*, *Verat.*, *Pulsat.*, *Phosph. acid.* and *Caustic.*, giving him the first and the two last-named remedies on account of an impression in his countenance as though some poignant grief were gnawing at his heart. Except the habit of knitting his brow, which is peculiar to all crazy individuals, and a tendency of the hair to stand on end, not one who had not known him before, could have noticed the least mental irregularity in his conduct. He conversed with much interest on chemical, physical and botanical subjects, took great delight in solving mathematical problems, attended with pleasure and an enlightened care to his garden and his small botanical greenhouse stocked with the most beautiful exotic plants; sat frequently down to his piano with a perfect delight, for the purpose of practising or executing his own fantasias, and had altogether become the most agreeable companion imaginable. He only avoided the company of the other sex, and if a friend talked to him about getting married, he was apt to get vexed and for some hours to relapse into his taciturn and melancholy mood. Whether this state of mind originated in self-abuse, which, according to his own confession, he had practised at college, I do not undertake to decide. It is certain that his sexual powers had been entirely extinct for upwards of three years and that he was not troubled with erections, seminal emissions or with the least desire to gratify the sexual passion either in a normal or abnormal manner. In this condition, during which I gave him at very long intervals extremely small doses of *Sulph.*, *Lycopod.* and *Ignat.*, he remained six months, and his family, with whom I had stipulated a whole year as the shortest period to test the efficacy of homœopathic treatment, were all but ready to celebrate the triumph of our art, when the patient was suddenly attacked, without any known cause, by a mania of the most violent and lascivious kind, during which he was visited by the fiercest and most persistent erections, pursued men and women with equal fury and assailed even his own mother with attempts at violence. As in other similar cases, so I was in this case disappointed by *Canthar.* altogether, whereas smelling of *Hyoscy.* 30th very speedily appeased the unbridled rage, reducing it down to a species of lascivious insanity, during which the patient talked incessantly of amorous and obscene things, but ceased his attacks on persons and was otherwise unwilling to leave his bed. By

continuing the use of *Hyoscy.* 30th in water for a fortnight, taking a teaspoonful of the solution morning and evening, the disposition to talk was arrested, but the confusion of ideas remained the same, and his lascivious fancies continued. *Phosph.*, administered in the same manner, produced such a marked improvement in the space of eight days, that the patient commenced to leave his bed again and, towards the end of the month only showed occasional detached symptoms of his former excitement which was finally so completely subdued by a single dose of *Sulph.* 30th, that, at the end of the third month, his condition was altogether the same that it had been previously during his free intervals. This time the free interval continued for nearly nine months without any sign of disturbance. Towards the end of the ninth month the patient suddenly declined one morning to leave his bed, returning to the question what was the matter with him, no other answer than that "he preferred to remain in bed." At the same time he seemed quite calm externally, but as soon as he was asked to rise, he became indignant, cast angry looks about while his eyes were rolling in their sockets; on one occasion he struck his nurse, whom he was otherwise very fond of, with his clenched fist in the face. Towards myself he not only seemed to manifest more regard, particularly when I remonstrated with him about his conduct, but, while I was talking to him, he hid his head under the cover as if he felt ashamed of what he had done; yet from time to time, especially when he fancied I did not see him, he put his head from under his cover looking askance at his nurse with angry eyes, and appearing to meditate some new trick. This condition, which was attended with inveterate constipation, was so speedily relieved by *Nux v.* 30th that on my next visit—I generally visited the patient, who resided in the country, every eight days unless the urgency of the case required a more frequent attendance—the nurse reported that the patient had left his bed on the third day, had asked pardon for what he had done, but, although apparently quiet, yet could not yet be trusted out of sight. By continuing the use of *Nux v.*, the patient became more and more quiet; only his look remained unsteady and instead of another free interval, the present attack changed to a sort of good-natured folly, during which the patient, who was perfectly rational for hours, addressed letters to kings and emperors, wrote warrants for the arrest of every person whose name he was acquainted with, and frequently conversed

with me with an appearance of logical consistency about the motives that had prompted him to decree this or that punishment against the parties he had condemned. While in this condition, which was perfectly free from the least sexual excitement, the patient slept well and relished his meals, and after the lapse of six to eight weeks, during which he took a number of remedies, among which *Cupr.*, *Hyoscy.* and *Verat.* benefitted him most, he was again so far restored that he might have been considered as good as cured. Indeed the hope of a perfect cure was this time well founded, for it was almost a year since any new attack had occurred. Nevertheless, before the year was entirely completed, another folly showed itself. Quite rational for hours, the patient would sometimes act like one possessed, wrapt himself in his warmest garments, although it was summer, drew his cap over his face and ears, and walked up and down in his garden declaiming vehemently, or sat down to his piano executing with musical correctness the wildest and noisiest phantasias. What was most remarkable in these short periodical attacks of dementia was, that the patient was more or less able to control or suppress them by the force of his will; precisely as I myself, during an attack of typhoid fever in the year 1838, prevented the delirium, by the sole force of my will, from ever increasing to a complete loss of consciousness. What stimulated my will-power was the apprehension that, being an entire stranger in the place where I happened to be stopping in a hotel (Toulouse), I might fall into the hands of allopaths. My patient's attacks were often very violent whenever he fancied he might allow them full swing, and I only watched him through a crack of the gently-opened door; when entering his room suddenly and noisily, as though I had just arrived, his fancies evidently moderated shortly after my salutation; he turned his head towards me, conversed with me quite rationally about the beauties of certain musical compositions, relapsing again, after a few minutes of serious conversation, into his wild fancies and taking no more notice of me at my departure than of anything else that was taking place around him. This period of his chronic dementia was to me the most difficult of all. For more than eight weeks I had been giving him all sorts of remedies without effecting any essential change in his condition, when during one of my visits I found him in a much greater state of excitement than ever, which was accompanied by such a violent

laughter that I was at once induced, without, however, expecting any very brilliant results from my treatment, to administer him *Croc.* 30th in globules, by olfaction. Five minutes had scarcely passed when he became more quiet; the laughter decreased visibly, so that from noon till evening no new paroxysm took place. I left him *Croc.* 30th, three globules, to be dissolved in half a cupful of water, of which solution he was to take a teaspoonful early in the morning and at night. When I visited him again eight days after, no new attack had occurred; the patient was much more cheerful and rational, and the improvement went on from day to day with such regularity that in less than a fortnight he was better than he had been since the beginning of his sickness. Henceforwards his health remained undisturbed, so that fifteen months later he was able, being apparently fully restored, to go to Egypt in company with his uncle. However, as long as I had an opportunity of observing him, he still retained the knit brow which is peculiar to all demented individuals. Two years after his departure for Egypt, I learned that, during his stay in Alexandria he had had several new attacks, from the last of which, which had already lasted six months, he was not yet relieved. This circumstance, however, does not show whether the long duration of this last attack was owing to the nature of the malady or to the inexperience of the attending practitioner.

Whatever may be said of this report in a clinical point of view, to which, if the limits of this work would permit, I might add a dozen similar ones, it certainly shows at all events that even a homœopathic physician has to be very cautious in not promising too much in hereditary mental diseases, and that it is good policy to prepare the relatives of such patients from the start, for possible relapses. Cases like the one that we have reported, are moreover to be classed among the most fortunate ones of the kind, since cases of inveterate insanity, for which nothing can be done by artificial means, are much more frequent, more especially if they had already been treated with shower and other baths, and had otherwise been subjected to the various quack-expedients of the Old School. All that the physician will be able to accomplish, in by far the vast majority of cases, is to change the *form* of the mania. I confess that I have not yet met with a case of *chronic* mania where I could have been certain that it would not break out again in *another* form. I have seen relapses of this kind occur even among

patients who had been regarded as cured for three years. The only psychical and mental derangements where a cure by artificial, sometimes only by *homœopathic* means, can be promised, are **acute** mental diseases that had originated in **accidental circumstances**; *all such diseases* can be cured by homœopathic means, not only with comparative speed, but permanently, by whatever names they may be known as pathological facts: mania, rage, melancholy, hysteria, hypochondria, craziness, dementia, etc., and no matter how violent and aggravating the exciting cause may have been; grief, fright, confinement, sun-stroke, concussion of the brain, etc. All that is needed in such cases to secure success is: 1. that the physician should be well acquainted with his remedies, that is to say, with their characteristic symptomatic indications; 2. that he should never try to accomplish by means of large doses of drugs improperly-chosen, or chosen in accordance with **general** indications, what can be much more speedily achieved by the smallest possible dose of some specifically adapted remedy; 3. that he should keep an eye on the exciting cause wherever it can be positively traced, and at the same time on the simultaneously-existing bodily complaints of the patient; and, 4. that he should not all at once despair of the good effects of a remedy that had been selected with a careful reference to all the bearings of the case, even if a favorable result should not all at once make its appearance, as sometimes happened in the previously related case. We must not forget to call attention to the fact that the truly characteristic indications of a remedy are not only to be found among the **psychical** and **mental symptoms** but likewise among the **dreams**. The dream-records among the symptoms of our drugs have furnished me important indications in many cases where the psychical and mental symptoms would never have led me to the selection of the remedy adapted to such cases and where the most fortunate selection of the remedy was entirely due to the symptoms recorded among the dreams. To illustrate, I remind the reader of dreaming about corpses and dead persons generally, which are so characteristic of *Silic.* Guided by these dreams I prescribed Silicea which is, it is true, likewise suitable for hysteria, in the case of a girl afflicted with hysteria and deep melancholy. She was mourning the death of her lover, and I felt so much more confident in the success of my prescription as she fancied she saw him in his coffin and a

number of other dead persons in front of her and on the road; the success surpassed all my expectations.

It is a pity that the reporters of the cures in Rueckert's "*Klinischen Erfahrungen*" have not only furnished very imperfect symptomatic pictures of their cases, but seem to have omitted the very indications which, to judge by the result, ought to have decided the choice of the remedy. Hence, in drawing a final conclusion from these reports we do not by any means arrive at a knowledge of all the true symptomatic indications corresponding with the remedies that are supposed to have cured the case, but a mass of other indications are likewise obtruded upon our attention, that cannot be regarded as true ones. Rueckert's *phrenological* classification is undoubtedly well meant, but cannot be taken as a guide; 1st, because, in the nature of things, it must necessarily be incomplete, and 2d, beeause it rests too much upon a hypothetical basis to yield definite conclusions regarding the choice of a remedy. As far as I am able I will now proceed to relate in as concise a manner as possible some particulars concerning the various forms of mental derangement that have come under my notice as subjects for treatment.

## A. Forms of Melancholia.

**1. General Melancholy.**—In this form of melancholy I have generally been most successful with *Phosph. ac.*, *Ignat.*, *Puls.*, *Sep,*. *Rhus tox.*, *Aurum*, *Caust.*, *Lachesis*, *Arsen.*, *Graph.* and *Natr. mur.* The frightful melancholia caused by **abuse of Mercury,** sometimes yields to *Hepar;* but if it has reached a degree that the patient feels as if he would perish from bodily and mental torture, *Aurum* is the only remedy that can help and does help surely and generally in a very short space of time, half a grain of the second trituration being given every other day as long as quicksilver is still in the body, after which *Aurum* 30th may be sufficient. For recent melancholy caused by grief, care and silent anguish, *Ignatia* and *Phosph. ac.* are very often entirely sufficient; but if the melancholy has already existed for some time, the best remedies are: *Caust.*, *Laches.*, *Arsen.* and *Graph.* If such patients are moreover tormented by **anguish,** *Arsen.*, *Verat. album* and *Puls.*, render the most efficient service, more especially if the patients' faces are

very pale; likewise in some cases, *Bellad.*, *Sepia* and *Merc.*, if the face is red; if the patient show a disposition **to be alone,** *Ignat.*, *Calc.*, *Nux v.*; if they are taciturn and obstinately silent, more particularly *Ignat.*, *Phosph. ac.* and *Veratr. alb.*; for melancholy with dread of death, if *Aconite* is insufficient, especially *Plat.* and *Arsen.* If there is much **weeping,** *Puls.*, *Platin.*, *Natr. mur.*, *Bellad.*, *Sulph.* If the patient **despairs of recovery** *from his sad condition*, *Verat. alb.* If he is **afraid he might not have enough to live on,** *Bry.*, *Calc.*, *Nux vom.*

**2. Hypochondriac Mental Derangement.**—For this form of derangement the best remedies generally are: *Nux vom.*, *Sulph.*, *Calc.* 3, *Con.*, which even help, if onanism is the exciting cause of the disease or if, in the opposite case, certain individuals given to asceticism and gynophobia, attribute their disease to excessive abstemiousness. If this condition is attended with **apprehensions** of disease, misfortune and misery, *Calc.*, *Cupr.* or *Sulph.* help; or, if the symptoms otherwise correspond, *Bry*, *Puls.*, *Rhus.*

**3. Religious Melancholy.**—If the patient inclines to torment himself with **reproaches of his conscience,** *Sulph.* and *Verat. alb.* afford the most help; I have likewise seen good effects from *Puls.*, *Laches.*, *Cupr.* and *Arsen.* If such patients are disposed to **pray** all the time, I give *Puls.* or *Aur.*, sometimes also *Verat. alb.* If they despair of their salvation, *Sulph.*, ranks first, afterwards *Laches.*, *Arsen.*, *Lycop.* and *Verat. alb.* If they talk a good deal about religious things, *Veratr. alb.* will help, and if this state of mind changes to frenzy, and *Veratr. alb.* is not sufficient, *Bellad.*, *Hyosc.* and *Stramonium* will often be found efficient remedies.

**4. Suicidal Melancholia.**—It is well known that a tendency to suicide may depend upon the most diversified causes, and that it may likewise arise from an internal, irresistible desire to destroy oneself. In this latter case *Arsenicum* helps almost always, sometimes even *Hepar*, especially if the patient is impelled by unaccountable attacks of internal anguish which sometimes come on quite suddenly. If the mania to commit suicide attacks persons **given to melancholy,** and who feel too unhappy to live, *Aur.*, *Puls.*, *Veratr. alb.*, *or Helleb.* help in most cases; **hypochondriac patients** are most benefitted by *Nux vom.*, very frequently also by *Caps.*, or *Carbo veg.*

**5. Erotic Melancholia.**—If this condition has its origin in an unhappy attachment, the most efficient remedies are: *Phosph. ac.*, *Ignat.* and *Hyosc.*, more especially if the melancholy is attended with a good deal of jealousy. If the melancholy changes to insane prattle, *Phosph.* is undoubtedly the first remedy, next to which come *Stramon.* and *Veratr. alb.* An innocent young girl whom an unhappy attachment had plunged into a state of insanity with rambling delirium, during which she accused herself of many obscene things which she had never committed, and upon whom *Hyoscy.*, *Stram.* and *Veratr. alb.* had no effect whatsoever, was freed from her condition in less than twenty-four hours by nothing but *Phosph.*, which I had prescribed for the spasmodic attacks of hysterical laughter and weeping, that were a characteristic symptom of her condition.

**6. Homesickness.**—If *Capsicum* is recommended by Hahnemann for homesickness with flushed cheeks, he has uttered a truth the correctness of which every practitioner can easily verify if he chooses. There are cases for which I desire to call attention not only to *Ignat.* and *Phosph. ac.*, which often afford help, but likewise to *Merc.*; this remedy has often rendered excellent service in my hands in cases where the patients not only desired to return to their homes, but likewise to leave their new residence for strange countries.

## B. Mania and Monomania.

**1. Rage.**—Although *Bell.*, *Hyosc.*, *Stram.* and *Op.* are the chief remedies for this condition, yet we should not overlook the claims of *Acon.*, *Cupr.*, *Merc.* and even *Crocus* and *Lyc.*, all of which have proved very efficient in my hands in suitable cases. If such patients are tormented by **frightful phantasms** which bring on rage, *Opium* or *Stramon.* help in most cases, especially if these phantasms seem to start out of the ground or threaten the patients sideways. If they act as if they would **bite** or strike or tear everything, *Bell.* or *Cupr.* may be required; if they seem **malicious** and tricky, *Bell.* or *Hyosc.*, or even *Nux v.* or *Laches.* may be given; if they seem to be driven by a jealous frenzy, not only *Hyosc.*, *Laches.* and *Puls.*, but even *Nux vom.* may have to be

given; if they seem without shame, strip themselves naked etc., *Phosph.* more than *Hyosc.* or *Stramon.* may be required; if they try all the time to **escape**, *Bell.* and *Stram.*, and very often *Nux vom.*, *Acon.*, *Hyosc.* and *Cupr.* may prove useful. If they **swear** and **scold** a good deal, I give *Lyc.* which in a case where *Anacardium* proved powerless, effected an immediate improvement; for **loquaciousness**, I give *Stram.*, *Verat. alb.*, *Hyosc.*, *Cupr.*, if the patients are very **lascivious**, *Bell.*, *Stram.*, *Veratr. alb.* are to be given; much **laughter** requires *Bell.*, *Croc.*, *Hyosc.*, *Veratr. alb.* If they whistle or sing a good deal, or make faces and cut capers, *Croc.*, *Cupr.*, *Hyosc.*, *Merc.*, *Stram.*, *Veratr. alb.* are indicated. If they attack people with knives, *Laches.*, *Hepar*, *Arsen.* are the remedies. If they spit in people's faces, *Bell.*, *Merc.*, *Cupr.* are efficient. If they eat their own excrements, *Merc.*

**2. Monomania.**—It is a remarkable fact that all the cases of monomania which I have had to treat up to this time, have been those of young girls from seven to ten years old. The following remedies have proved chiefly efficacious: *a.* for the **mania to kill**, in the case of a girl who had made already two attempts to stab first her nurse and afterwards her younger brother, *Arsen.*, after which *Laches.*, and in another similar case, where these two remedies had no effect, *Hep.* and *Platina.* In the case of a man who complained of being haunted by thoughts of murder, *Laches.* and *Hepar.* *b.* for **cleptomania** or the mania to steal, in the case of three children, *Sulph.*, *Puls.* *c.* for the **mania to commit arson**, *Hepar*, *Bellad.*

**3. Nymphomania and Satyriasis** (sexual mania). In the case of **males** I have derived the best results from *Phosph.*, *Nux vom.* and *Canth.*, likewise from *Merc.* and *Sulph.*; in the case of **women**, from *Hyosc.*, *Plat.*, *Verat. alb.*, and in some cases from *Phosph.* and *Bellad.* If this mania is attended with a great want of modesty and lascivious impudence, and *Hyosc.* and *Veratr. alb.* have no effect, *Phosph.* often acts with surprising results.

**4. Delirium tremens, mania-a-portu.**—If the mania has reached its highest degree, *Bellad.* is always my first remedy, to which I prefer *Opium* only if the delirium occurs alternately with a stupefying sopor, is of an anxious kind and mingled with

visions of ghosts, demons and pursuing enemies; if the visions are of a **frightening** order, such as animals starting out of the ground sideways, the best remedy I know of is *Stramonium.* If the furious mania is accompanied by a good deal of febrile heat, I commence the treatment with *Acon.* which often removes the whole trouble, if given at the outset of the disease. These are always my first remedies, after which, if the disease is not entirely conquered, I give other medicines, such as: *Nux vom.*, if the patient wants to rove about in the streets, and is troubled with a good deal of retching and constipation; *Arsen.*, if the patient is tormented by anguish that drives him from place to place and finally to attempt to destroy himself; *Calcarea*, if the patient continues to talk about fire and rats and these phantasms haunt him more particularly in the evening and in the dark; *Sulph.*, if *Nux vom.* has no effect against the retching and *Arsen.* against the trembling of the hands. If the attacks are not very violent, I often commence the treatment at once with *Sulph.* and *Nux vom.*, after which I give *Calc.* In all these cases, as in the previous forms of mania, I never give more than two globules of the thirtieth attenuation, which I repeat if necessary; this treatment has effected speedy cures in my hands. [Opium has often to be given in larger doses. In cases where opium has no effect, the *Bromide of Potassium* often helps. There are cases where *Capsicum* helps; this remedy likewise may often have to be given in larger doses. H.]

### C. Dementia of Various Kinds.

This class of mental derangements is so vast and diversified that it is utterly impossible to define all the various forms of insanity or lunacy, and that I have no choice except to indicate the remedies which I have hitherto found most efficient for corresponding symptoms.

**1. Fixed Ideas Generally.**—*Ignat.*, *Silic.* Cannot forget past **insults**, *Ignat.*, *Sulph.*, *Natr. mur.* Fancies she possesses a quantity of **ornaments** and fine dresses, *Sulph.* Sees **pins** everywhere, *Silic.* Thinks he is a **criminal**, *Cupr.*, *Merc.*, *Bellad.* Despairs of **salvation**, *Sulph.*, *Puls.*, *Laches.*, *Ignat.* Despairs of

sufficient means of support, *Calc.*, *Bry.*, *Nux vom.* Apprehends an approaching death, *Acon.* Fancies himself surrounded by dead persons, *Silic.*

**2. Visions and Hallucinations** of corpses and skeletons, *Silic.*, *Bellad.*, *Arsen.*, *Opium;* of ghosts and demons, *Bell.*, *Arsen.*, *Opium*, *Cupr.*, *Plat.;* of rats and mice, *Arsen.*, *Calc.;* of vermin and worms, *Arsen.*, *Nux vom.;* everything seems larger, *Hyosc.;* everything seems smaller, *Platina.*

**3. Fear** of Thieves.—*Arsen.*, *Silic.*, *Merc.*, *Laches.;* of ghosts, *Puls.*, *Sulph.*, sometimes *Drosera;* of being poisoned, *Hyosc.*, *Rhus.;* of pursuing enemies, *Bell.*, *Silic.;* of being sold, *Hyosc.*

**4. Hysteric** derangements.—These derangements which sometimes degenerate into the worst kind of insanity, are infinitely more frequent than is generally supposed; I have seen them under all sorts of forms, and in most cases have achieved a good deal of success with *Ignat.*, *Phosph.*, *Plat.*, and have been equally successful with *Aur.*, *Croc.* and *Sepia.* If such patients are tormented by excessive sexual fancies, which is not by any means always the case, I know of no better remedies than *Phosph.*, or *Puls.* and *Platina.* If the patients act foolishly or with a good deal of frivolous levity, *Apis* has rendered me good service; if they are of a fitful mood, at times laughing and at other times weeping, *Crocus*, *Puls.*, *Phosph.*, *Lyc.*, *Stram.* are efficient remedies. If they lie a good deal, so that not a word of truth comes out of their mouths, and they themselves scarcely know what they are babbling about, *Veratr. alb.* helps sometimes.

**5. Various Detached Symptomatic Indications.**—When there is an insane passion for work, *Laches.*, *Hyosc.* Suspicion and distrust, *Merc.*, *Laches.*, *Puls.*, *Hyosc.*, *Bellad.* Excessive bodily and mental excitement, first of all, *Acon.* and *Nux vom.*, after which *Phosph.*, *Bell.*, *Laches.* An imperious mood, a passion to order people about, *Lyc.*, *Cupr.* A tricky and malicious dispositions, *Nux vom.*, *Laches.* Great obstinacy, *Bellad.*, *Ignat.*, *Lyc.* A disposition to be alone, *Calc.*, *Ignat.*, *Cupr.* A dread of being alone, *Phosph.*, *Lyc.*, *Stram.* An appearance of being very busy

*Laches.*, *Phosph.*, *Silic.* Great **loquacity**, *Stram.*, *Veratr. alb.*, *Hyosc.* Excessive **mirthfulness**, *Croc.*, *Hyosc.*, *Stram.*, sometimes also, *Bell.*, *Cupr.*, *Verat. alb.* Great **dread of talking** and a taciturn mood, *Verat. alb.*, *Phosph. ac.*, *Ignat.*, *Puls.* Great **want of modesty**, *Phosph.*, *Hyosc.*, *Verat. alb.* Great **disposition to sing**, warble and whistle, *Bell.*, *Croc.*, *Stram.* **Making faces** and cutting **antics**, *Cupr.*, *Bell.*, *Stram.*, *Hyosc.* A good deal of **scolding** and **swearing**, *Lycop.* Disposition to **censure** and rebuke, *Caps.*, *Verat. alb.*, *Arsen.* Much **weeping**, *Puls.*, *Plat.*, *Natr. mur.*, *Sulph.*, *Bellad.* Excessive **pride**, in the case of men, *Cupr.* In the case of women, *Platina.*

## D. Indication of a few External Causes.

Nothing probably is still involved in greater obscurity, than the external causes to which mental and psychical derangements owe their existence. Some of these causes are well known, such as fright, a sudden joy, long-lasting grief and silent care, abuse of spirits, sexual excesses, menstrual irregularities, pregnancy and confinement, excessive mental exertions, sunstroke, concussion of the brain, repelled erysipelas of the face etc. Almost all the mental and psychical diseases occasioned by these causes, are of an acute character, whereas chronic mental derangements can often be traced to a morbific cause, only with a good deal of uncertainty. It is more than likely that many of these derangements owe their origin to tinea capitis, or to some herpetic eruption that had been repelled in early childhood. At any rate I fancy that I have observed this fact in the case of a man forty years of age, whom I treated for attacks of profound melancholy; in his youth he had scald head, and afterwards suppurating tetter on the arms and legs, and now was entirely free from all cutaneous eruptions. The unfounded grief and despondency by which he was tormented, pointed principally to *Caust.*, *Graph.* and *Arsen.* Each of these remedies effected some improvement, until a dose of *Arsen.* was suddenly succeeded by the breaking out of herpetic ulcers on the lower extremities, after which he suddenly cheered up as if he had always been the merriest man in the world. Unfortunately these and similar causes remain hidden from our observation, and even if we sometimes suspect their nature in chronic derangements, we never acquire such perfect certainty regarding them as in acute

affections, and hence are unable to build a plan of treatment upon such a frail basis. This is the reason why the indications for the selection of drugs, which the **exciting causes** have suggested to me, are comparatively scanty, since I do not wish to make any statements except such as I can substantiate by my own observations. These are the following:

Psychical derangements after a violent **fright** or a sudden **joy** always require first, *Acon.*, especially if the patient seems very much excited and at once goes into fits of rage. If there is little fever, but a violent and furious delirium, *Opium* is suitable, and if the patient, being tormented by continual anguish and fear, attempts to escape, *Bellad.* For subsequent remaining symptoms, *Ignat.* is an excellent remedy, especially if the patient is haunted by **fixed ideas** day and night.

After deep **humiliations** or **mortification of one's feelings.** In the case of persons with gentle and retiring dispositions, no remedy has proved more servicable in my hands than *Pulsatilla*, and in the case of persons with **haughty tempers**, especially women, *Platina*, provided the physical signs corresponded. *Coloc.*, *Bellad.*, *Nux vom.* and *Staph.*, which are recommended by others, have seemed to me less specifically adapted to this cause of mental derangements; *Ignatia*, on the contrary, has proved very efficacious in similar cases.

After deep **grief and care.** If the other symptoms correspond, *Ignat.* and *Phosph. ac.*, are undoubtedly the most efficacious remedies, although *Caust.* and *Laches.*, if not otherwise counter-indicated, have likewise shown good effects in many cases; so has *Graphites.* If *Staph.*, *Arsen.*, *Bellad.*, *Coloc.*, *Hyosc.*, *Lycop.*, *Nux vom.*, *Verat. alb.*, which are likewise recommended, are to do any good in such cases, the totality of the symptoms must present very definite indications beside the exciting cause; this latter alone is not sufficient in a single case to furnish the least indication for the selection of the proper remedy and its successful administration.

After excessive **mental exertions.** In the cases which have come under my treatment, the characteristic symptoms pointed to *Nux vom.*, *Laches.* and *Calc.* respectively, each according to its specific symptomatic indications; only in exceptional cases very special symptoms required *Silic.* and *Sepia*, and still more frequently *Sulph.* In the case of an old lawyer which was complicated with paralytic symptoms, *Phosphorus* showed extraordinary curative powers.

After **abuse of spirits.** If this abuse leads to delirium tremens, the above-mentioned treatment will be found sufficient to a cure. Very often, however, long before the delirium breaks out, such patients are tormented by various psychical disturbances, such as a feeling of great anguish in the abdomen or chest, for which *Arsen.* or *Nux vom.*, do more than most other remedies; or apprehensions concerning the future, more especially a dread of misfortune or misery may assail the patient, *Calcarea* is a specific remedy for such symptoms, more particularly if they are associated with paroxysms of anxiety and fear assailing the patient in the darkness, at night.

After **sexual excesses.** *China* which is recommended by a number of physicians under such circumstances, is of no sort of use in such cases, and its employment involves a mere loss of time. Even *Phosph. ac.*, which is somewhat more frequently indicated than China, is only appropriate in exceptional cases, nor is it ever as positively indicated as *Sulph.*, *Calc.* and *Nux vom.*, which I have found in most cases perfectly sufficient to remove permanently and in a comparatively short space of time the deep melancholy and joyless hebetude and apathy which are such frequent consequences of sexual excesses, especially of self-abuse. For similar derangements, I have sometimes found *Phosph.* and *Sepia* efficacious in the case of young girls.

In the case of **hæmorrhoidal** individuals I have very often, beside the customary *Nux v.*, *Sulph.* and *Calc.*, found *Arsen.*, *Puls.*, *Cupr.* and *Phosph.* useful, each according to its symptomatic indications; *Capsicum* has been found equally efficient in the case of indolent, thickset, awkward individuals, who were haunted by a melancholy disposition to suicide, and whose habitual hæmorrhoidal discharge had been suppressed.

After repelled chronic **eruptions,** herpes, old ulcers: *Arsen.*, *Graph.*, *Caust.*

When complicated with **liver-complaint:** *Nux vom.*, *Laches.*, *Bellad.* More than any other remedy *Lycop.* and *Calc.*, likewise in very many cases *Sulph.*, which I sometimes give in this kind of melancholy with the best effect at the very outset of the treatment.

If **heart-disease** is present: very often *Acon.* or *Aurum*, occasionally *Arsen.*, *Puls.* and *Natrum mur.*, more especially if patients afflicted with this kind of melancholy, have an obstinately intermittent pulse [also *Digit.* and *Cactus.* H.]

If complicated with **menstrual derangements.** If they are the real cause of the melancholia, the symptoms point to *Puls.*, *Sulph.*, *Sepia*, *Coccul.*, *Verat. alb.* and *Stram.*, which will be found sufficient in almost all cases; however I have had cases of suppression, when the menstrual flow was generally very profuse and the suppression was followed by an extreme excitement almost bordering on mental derangement and attended with an almost insane moaning and lamenting, where *Phosph.* effected a most marvelous and rapid improvement.

After **suppression of erysipelas of the face,** what *Bry.* and *Cupr.* are capable of effecting in such cases, cannot be accomplished by any other remedy, not even by *Bellad.*, *Hyosc.* and *Laches.* I have treated a case of chronic dementia of six months' standing, consequent upon suppression of facial erysipelas, where paroxysms of rage occurred every now and then, and where *Cuprum* effected an improvement, after which the cure was completed by means of *Bellad.* and *Stram.*, which had no effect before the Cuprum was administered.

After **sunstroke** and getting **overheated.** In such cases I depended formerly upon *Bellad.* and *Bry.;* but since I have become acquainted with *Glonoin*, I resort to this remedy in the first place, even for subsequent consequences of such accidents; so far this remedy has effected in my hands, in every case, at least a perceptible beginning of an improvement with more promptitude than either *Bellad.* or *Bry.*

After **concussion of the brain.** In cases where such an accident was at a later period succeeded by mental derangement, neither *Arnica* nor *Bry.* has had the least effect in the cases which I have had to treat; on the contrary, I have in several cases obtained excellent results from *Cicuta* and *Calc.*, after which *Phosph.*, *Zinc.*, *Bellad.*, *Rhus* and *Cupr.* completed the cure.

During **pregnancy** and **confinement.** Chief remedies in such cases are: *Plat.*, *Bell.*, *Verat. alb.*, *Acon.* [also *Gelseminum.* H.]; not one of these remedies, if it had been selected in accordance with the symptoms, has ever failed me; only in particular cases I have had to resort to *Puls.* or *Sulph.*, in order to cover the whole group of symptoms. Notwithstanding the very respectable recommendations of other practitioners I have never yet employed *Zincum* in such cases, for the reason that I have never yet found it indicated, and moreover have been able to get along without it. In spite of

the anathema which certain incompetent critics have launched against *Aconitum*, I cannot sufficiently recommend this agent as a **specific** remedy in all cases where pregnant or lying-in women are tormented by a senseless **fear of death.** It always helps, if no evident counter-indications are present; if the cheeks are moreover flushed and the patients complain of præcordial anxiety, even the smallest dose has sometimes a truly surprising effect.

## CHAPTER II.

## MORBID PHENOMENA IN THE BRAIN.

### 1. Vertigo.

The ordinary attacks of vertigo emanating from the stomach or abdomen, or depending upon an **accidental determination of blood** to the brain, are easily removed by any one who is somewhat acquainted with the symptomatic indications of *Bellad.*, *Acon.*, *Puls.* and *Nux vom.*, so that it will not be necessary to dwell upon such derangements more fully. **Congestive** vertigo is speedily relieved by *Aconitum*, if *Bellad.* should fail us. For **gastric** vertigo the chief remedy is *Puls.*, which will scarcely ever have to be followed by *Nux vom.*

**Chronic** vertigo is much worse, especially when occurring after suppression of chronic eruptions and ulcers, or among people of advanced age, more particularly if their attacks of vertigo are complicated with headache, in which case apoplectic attacks or even softening of the brain are apt to occur as remote consequences. In many cases of this kind, especially where softening of the brain was to be apprehended, I have often succeeded in relieving my patients by means of *Opium*, *Secale* and *Conium*, more particularly, however, by means of *Phosphorus*, which displays great curative powers in every imaginable case of vertigo, more especially in vertigo described as **nervous** vertigo.

Moreover in all attacks of **congestive** vertigo, with vanishing of ideas, or attended with anxiety, my chief remedy is *Bell.*, for which I substitute *Aconit.* only if the patient is tormented by a fear of dying, attended with flushed face; or else *Nux vom.*, if the patient is afflicted with hæmorrhoidal complaints and the vertigo attacks him more particularly when he is absorbed in thought or immediately after he has laid down in bed. If the attack arises from **suppression of the menses** and is attended with buzzing in the

ears, or if the vertigo is felt in the evening or while the person is sitting, and the face is hot and the cheeks pale, I know of no better remedy than *Pulsatilla*. If an attack of this kind is accompanied by bleeding at the nose, not only *Acon.* and *Sulph.*, but occasionally *Bry.*, have afforded essential benefit to my patients.

For **gastric** vertigo emanating from the stomach or abdomen, I always commence the treatment, if the vertigo seems to originate in **derangement of the stomach**, with *Puls.* or *Ant. cr.;* or if the patient is troubled with **worms**, I give *Acon.* or *Merc.*, and if the vertigo sets in after every somewhat full meal, *Nux vom.*, and afterwards *Sulph.;* for this kind of vertigo, *Nux* and *Sulph.*, have always proved most efficacious in my hands.

What is sometimes much more troublesome is the treatment of the so-called **nervous** vertigo which not unfrequently attacks hypochondriacs, hysteric persons, or persons with a very sensitive nervous system, or which may set in after debilitating causes, especially self-abuse, or after saddening emotions, exhausting diseases, excessive mental exertions, or even in cases where the cause cannot always be easily found out. It is not always easy to find the correct remedy for this kind of vertigo. The following remedies have proved most serviceable in my hands:

If the vertigo is attended with **fainting**, beside *Chamom.*, likewise *Mosch.* (especially among hysteric individuals), and *Nux vom.*, also *Hepar.*

If the **vision** is **obscured** at the same time, beside *Bellad.*, likewise *Acon.* and *Hyosc.*

If the patient threatens to fall **backwards**: *Bellad.;* if **sideways**, especially *Conium* and *Sulph.;* if **forwards**, *Rhus* and *Graph.*

If the attacks set in while the patient is **rising from a recumbent posture**, *Acon.* and *Bell.*—If they set in after the patient has **laid down in bed**, more particularly *Nux vom.*, less frequently *Rhus.* If the patient is very feeble, and cannot **move**, nor **raise his head**, without having another attack: *Coccul.* If the vertigo is brought on by **raising one's eyes** and **looking upward**, beside *Puls.* and *Nux vom.*, sometimes also *Calc.* If the attacks are only experienced when one stoops, *Calcar.* sometimes helps beside *Acon.;* *Bellad.* only helps if the patient is troubled with rush of blood to the head. For the vertigo occasioned by **riding in a carriage**, *Coccul.* and *Sulph.* sometimes prove useful, beside *Hepar* and *Silic.*

Moreover I have often employed with excellent success: *Silicea*

almost as a **specific** remedy, if the vertigo seems to **ascend from the back** or **nape of the neck**; *Causticum*, next to *Sulph.*, *Calc.* and *Arsen.*, after **suppression of ulcers**; *Conium* if hysteric persons are attacked, or individuals weakened by **self-abuse,** more particularly while they are looking around, and the vertigo threatens to throw them down; *Lachesis* for a purely nervous vertigo, with paleness of the face and absent-mindedness. [Quinine, in small doses, is an admirable remedy for vertigo as if the brain would float off, sometimes attended with slight chilly creepings. H.]

*Mercurius*, whatever others may say of it, has so far been found truly curative only, and even then only passingly, if the vertigo was owing to **worms,** although even in such cases I have most generally accomplished a good deal more with *Acon.*, *Cicuta* and *Silicea.*

Finally, in every **chronic** disposition to attacks of vertigo, the causes of such attacks, as founded in the constitution or mode of living of the patient, cannot be too carefully investigated; among the most frequently occurring causes of this kind I have noted the following:

1. Long-continued abuse of **narcotic** substances, or even only of coffee, in which cases *Phosph.*, *Laches.*, *Arsen.*, *Calcar.* and *Sulph.* have often been of more use to me than any other drugs. 2. **Debilitating** influences, such as long-continued loss of animal fluids, in which cases *Sepia*, *Sulph.*, *Calcar.*, and even *Puls.* and *Hep. sulph.* often prove more efficacious than the extravagantly and improperly extolled *China.* 3. Excessive **mental efforts,** where *Pulsat.*, *Conium*, *Laches.* and *Silic.* often accomplish as much as *Nux. vom.* 4. **Apoplectic habit** and frequent **congestions of the head,** in which *Acon.*, *Bellad.* and *Nux vom.*, as well as *Arnica* and *Opium* are the chief remedies [also *Gelsem.* and *Veratr. vir.* H.]. **Hæmorrhoidal** disposition and **abdominal plethora**; in vertigo arising from these causes, as well as in the case of **hypochondriac** individuals generally, not only *Nux vom.*, *Sulph.* and *Calcar.* but likewise in many cases *Puls.*, *Laches.* and even *Lycop.* and *Phosph.* can be employed with the best results; in a case of this kind, where, after every other remedy had been tried without any benefit, *Lycop.* effected a considerable improvement in the attacks of vertigo, to which a hæmorrhoidal individual, a man of 68 years, was subject; *Phosphorus* removed the whole trouble by restoring the hæmorrhoidal discharge as by magic, after it had been suppressed for upwards

of ten years. 6. Hereditary disposition to **epilepsy,** that is to say in families where this disease prevails; the very suspicious attacks of vertigo to which such persons are subject have been most effectually controlled in my hands by *Bell.*, *Sulph.*, *Silic.*, *Calc.* and *Laches.* 7. **Hysterical** constitution; individuals of this character, if the symptoms otherwise corresponded, were very frequently benefitted by *Phosph.*, *Cicuta*, *Conium*, and not less by *Cocc.*, *Lycop.* and *Pulsat.* 8. **Injuries of the head;** if recent, *Arn.*, *Cicut.* and *Rhus* always earn by their good effects the praise that is bestowed upon them, but if the accident had occurred years ago, other remedies are most generally required, among which I have so far found *Calcar.* and *Phosph.*, and likewise *Sulph.* and *Silic.* most useful. 9. Even **inveterate syphilis** should not be overlooked in a case of vertigo, if we wish to establish a correct diagnosis. I once treated a man sixty years of age, for vertigo attended with headache. After having given him all kinds of remedies without the least benefit, he showed me one day a recent exostosis on the cranium, which led me to suspect the existence of exostoses on its inner surface, and suggested the employment of *Aurum* 2d, half a grain every four days, after which the whole trouble disappeared entirely in less than three weeks.

## 2. Apoplexy.

1. It is a pity that the cases which are reported in Rueckert's "*Klinischen Erfahrungen*" and which, it must be admitted, have been extracted with great fidelity from the original publications, do not always present the symptoms with sufficient completeness to enable us to decide in every case with certainty whether the case reported as cured was indeed a case of **true apoplexy** (*hæmorrhagia cerebralis vera*), or perhaps a severe **cerebral congestion,** without effusion of blood, or only a **serous** effusion, or perhaps a simple attack of **paralysis** of the cerebral nerves. Whatever may have been reported under the general denomination of **apoplexy** concerning the remedies that are supposed to have cured the attack, it is perfectly certain that no **true apoplexy** with **effusion** in the brain, has ever been cured either with *Puls.* or *Nux vom.*, *Arnica* or other similar remedies, nor that the imminent danger of death will ever be removed by any of them. In a case of **sanguineous**

**effusion,** which always takes place if the suspension of cerebral activity is associated with paralysis of a part or a whole side of the body, the speediest possible exhibition of *Bellad.*, provided it is not too late, even when given at the thirtieth potency, three globules in water, a teaspoonful every 15 or 30 minutes, may do wonders and save the patient's life; if, after the cerebral functions have been re-awakened by *Bellad.*, there is an evident suspension in the improvement, we may, according to circumstances, think of such intercurrent remedies as *Opium*, especially if **stupor** with **stertorous breathing** has supervened, or of *Hyoscyamus;* if these remedies do not effect any striking improvement, we shall most likely have to fall back on *Belladonna* and continue this remedy until the consciousness has been entirely restored, after which, if symptoms of cerebral congestion or paralysis still remain, which *Bell.* seems unable to remove, other remedies will undoubtedly have to be chosen, such as *Coccul.* for paralysis of the lower extremities, and likewise *Nux vom.* and *Arnica*, which I have found very serviceable. To employ *Aconitum*, as some advise, for these attacks of sanguineous effusion on the brain, is not only absurd, but seems to me a criminal proceeding, for the reason that *Aconite*, however much it may be capable of accomplishing in uncomplicated **cerebral congestions** with **threatening** hæmorrhage, but where no actual effusion has yet taken place, will never have the least effect where the effusion is accomplished.

2. Generally speaking these **sanguineous effusions** in the brain occur much less frequently than the apoplectic **cerebral congestions;** before the effusion takes place, several attacks of congestion have generally preceded. Not unfrequently three such attacks of congestion take place successively within a short period of time, (in several cases I have seen them follow each other every eight days on the same day of the week), successively increasing in intensity unless the physician is on his guard; if two attacks are treated allopathically by opening a vein, and a third attack sets in, no homœopathic remedy can save the patient's life. Very frequently the **cerebral congestion** is from the start mingled with so many symptoms of complete suspension of cerebral action and even of partial paralysis of the brain that the congestion borders very closely upon actual **effusion** which, even if it has not yet taken place, may have to be expected almost at any moment. It is only

very *light* cerebral congestions that, in such cases, will be favorably impressed by *Acon.*, *Nux vom.*, *Arnica* etc. [also *Verat. vir.* II.] If all signs of consciousness have disappeared, I always administer *Bellad.*, especially if the symptoms on the right side are worse, and after *Bell.* I prefer *Opium*, more particularly if the **slow** and **stertorous** respiration is accompanied by a tetanic rigidity of the whole body. If these last-mentioned symptoms are associated with **spasms of the pharynx** and the mouth is drawn to the right side, in such a case I likewise prefer *Bell.*, or if during the pharyngeal spasm the paralytic symptoms are worse on the left side, *Lachesis;* with these three remedies I have so far succeeded in all cases that have come under my treatment, to remove the first threatening symptoms and to improve the condition of the patient, if not altogether, at least sufficiently to enable *Coccul.*, *Nux vom.*, *Hyosc.*, *Cupr.* or even *Arn.* to complete the cure. The practical physician should, however, never forget that, as long as headache, vertigo or occasional absent-mindedness continue, there is danger of a renewed attack, and that this danger reaches its acme on the eighth day after the last attack, more particularly in the case of individuals who are affected with symptoms denoting chronic softening of the brain. Such remedies as *Acon.*, *Arn.*, *Baryt.*, *Ipecac.*, *Apis* and *Glonoin*, which are warmly recommended by others in sanguineous apoplexy, have so far been employed by myself only as intercurrent remedies and even then have been found indicated only in a few cases. On this occasion I emphatically warn my readers against certain lucubrations of the murderer and swindler, Pomerais, who was executed in Paris; they are contained in the supplement to Rueckert's "Klinischen Erfahrungen," and are not, as the reporter seems to have regarded them, results of **clinical observations**, but purely **theoretical** compilations taken from the Materia Medica Pura by a man who had written his book for the sole purpose of giving himself the appearance before the public of a great homœopathic practitioner, but who probably never had treated a single case of apoplexy in accordance with real homœopathic rules. A good deal of this work has even been taken from similar arrangements in Hartmann's Therapeutics and a few former French publications and, insofar as the symptoms referred to in the Materia Medica Pura are founded in truth, it may sometimes serve to lead to the selection of the right remedy. But to blindly rely in threatening cases upon Pomerais' indications as upon gospel

truth, would certainly lead to the most awful disappointments; for they really are rather any thing else than truthful and *clinically* confirmed indications for the selection of the *characteristic* remedy. If *physiological* observations acquaint us with the *symptoms* of the diseases in which a remedial agent can afford help provided it is indicated, it is only by a number of practical trials that we can determine the symptoms which are characteristic of a drug, and hence *indicate* it as a remedy in special cases.

Generally speaking *Aconitum* has proved an excellent remedy in my hands in very mild and sudden **attacks of congestion** of young, robust individuals, especially if the pulse is somewhat irritated, and there is a good deal of vertigo, with throbbing of the carotids and the consciousness is not yet lost. I have found *Acon.* particularly useful, if such a condition originated in some violent emotion, a fit of excessive **joy** no less than a sudden **fright** or a violent fit of **chagrin.**

3. Whether, what is termed **nervous** apoplexy (apoplexia nervosa), really exists as a truly idiopathic disease, or whether the various forms of apoplexy classed under this head, originate primarily in a **congestive condition** of the brain, I am unable to determine and, unless we are permitted at once to open the cranium in every case of this kind for the purpose of investigating the condition of the brain, the diagnosis will have to remain doubtful in many cases. I am indeed able to relate a few cases from my own practice, where various preliminary symptoms, such as a drawing in the back, nape of the neck and single limbs, vertigo, ringing in the ears etc. were suddenly succeeded by an apopletic attack with or without vomiting, but with complete insensibility and rigidity of single limbs, irregular respiration, distortion of the features, slow but empty and more or less irregular pulse, and sometimes even a sleep having all the appearance of death, with convulsive twitchings of the extremities and tremor of the lips. In such cases which I have never met with except among very nervous females and which, on this account, I have always regarded as purely **hysterical** phenomena, [it is well known under what *Protean* forms this pathological process may manifest itself,] I have generally effected the recovery of the patient very speedily with *Ipecac.*, if the attack was attended with convulsive vomiting with or without spasm; with *Cupr.*, if this remedy was indicated by **convulsive**

twitchings of the fingers; with *Coccul.*, if the lower extremities seemed to be principally involved in the paralytic attack; and with *Hyosc.* and *Stram.* if the patients seemed to be lying in a state of unconsciousness and complete stupefaction. As a rule I do not consider such attacks dangerous to life, although I have met with a case of this kind which terminated fatally. The patient was a girl of eighteen years whom I had formerly treated with satisfactory success for very severe and marked hysterical paroxysms. One afternoon, about two o'clock, her father came to me asking me to visit his daughter who had been free from attacks of this kind for the last three years, but who had had another paroxysm the day previous and was now completely unconscious and lying in a deep sleep with her mouth open, with distorted features, a livid complexion, and a superficial and oppressed respiration. Not being able to leave my office-patients at the time, I gave the father three globules of *Hyosc.* 30th, with directions to dissolve them in water and to give his daughter a teaspoonful of this solution every fifteen minutes until my arrival. When I arrived at four o'clock, the father who, not suspecting the danger, had attended to a few errands, had just reached home; the medicine had not even yet been prepared. The girl was dying, the lower extremities as far as the abdomen were icy-cold, her eyes were half closed, and only a very superficial respiration was still perceptible. I gave her *Hyosc.* 30th to smell of, but she expired in five minutes, whereas on the morning of the same day she seemed to enjoy her usual cheerfulness and good health, and her otherwise vigorous constitution precluded any possible apprehension of such a sudden and unexpected end. On several occasions I have observed nervous attacks of this kind in individuals given to self-abuse or in men who had become debilitated by other causes; the attack might easily have been mistaken for an attack of genuine syncope, if its protracted duration, the complete loss of consciousness mingled with twitchings and convulsions, and the symptoms of incomplete paralysis of some parts, such as the urinary organs, the organs of speech and the muscles of deglutition, had not clearly pointed to an invasion of the cerebral activity. In such cases I have experienced excellent results from *Ipecac.*, sometimes from *Phosph.* and *Nux vom.*, and no less from *Arn.* and *Baryta*, the last two remedies more especially in the case of aged people who had been addicted to drinking and had been weakened by venesection.

**4. Serous Apoplexy.**—Whether the cases that are reported cured, are really cases of serous apoplexy, or only simple **congestions of the brain,** will probably never be substantiated with sufficient positiveness to compel the critics of the so-called Physiological School to accept the diagnosis as correct. Here too the *sole* sure diagnostic sign would be an actual demonstration of the serous effusion in the brain. Nevertheless several cases have occurred in my practice where more or less characteristic symptoms were suddenly followed by a sort of **apoplectic** suspension of cerebral action. Yet not a single symptom of plethora or sanguineous congestion had been observed; whereas the pallid and bloated countenance and the feeble and indolent pulse of these patients justified the conclusion that there was an effusion of **serum.** These patients were old and of a cachectic constitution, and seemed sunk in a deathlike slumber. One of them died afterwards from his third attack; a post-mortem examination revealed considerable softening of the left hemisphere of the brain. It is a remarkable fact that in similar cases *Bellad.* has proved as efficacious in my hands as *Merc.* and *Helleb.* As regards *Ipecac.*, which is likewise recommended in such cases, I have seen really good effects from it only in one case where it was indicated by the simultaneously existing vomiting, [in such a case *Tart. emet.* is likewise excellent. H.] *Baryta* and *Zinc.* have likewise rendered excellent service in such cases; *Digitalis* has always seemed utterly powerless. In a recent case, with a small, almost filiform and rapid pulse, *Glonoin* afforded remarkable aid.

5. In apoplexy of any kind my first recourse is always to *Belladonna* if the **consciousness is entirely suspended,** or to *Opium*, if the patient is lying in a deep stupor, with his mouth open and stertorous breathing; if the loss of consciousness is accompanied by **involuntary evacuations from the bowels and bladder,** I resort to *Arnica*, after *Hyosc.*, which is almost a specific for these symptoms, has proved powerless.

Beside these indications I have found the following symptoms worthy of note:

If the patients continually **grasp at their head,** I rely especially upon *Opium*, sometimes also upon *Phosph.* If they are continually **touching their sexual parts,** upon *Hyosc.*, which is almost a specific remedy. If the corner of the mouth is drawn to the **right** side,

upon *Bellad.* and likewise *Laches.;* if drawn to the **left** side, and *Bellad.* proves ineffectual, upon *Nux vom.* and sometimes upon *Phosph.* If **convulsions** are present at the same time, and *Bellad.* and *Hyosc.* have no effect, *Cupr.* sometimes affords excellent aid.

### 3. Inflammation of the Brain. Meningitis, Encephalitis.

If Hahnemann states somewhere in his writings, (I do not now remember the precise passage), that true inflammation of the brain never attacks *adults*, except perhaps in typhus and certain cases of poisoning, it is very likely that he was not altogether wrong. Except **tubercular** meningitis which, so far, has occurred in my practice only in the case of young people between the years of eighteen and twenty-two, I have never yet met, except in childhood, with a case of truly **idiopathic,** and as it were spontaneous meningitis, and which was not occasioned by some accidental cause, such as a fall, sunstroke etc. Very severe irritations of the cerebral membranes have occurred to me quite often as **symptomatic** phenomena, not only in typhus and erysipelas of the face, but likewise in some cases of **influenza,** even after the sudden suppression of a simple **catarrh,** in consequence of the affection spreading to the frontal cavities; in more cases than one I have seen a symptomatic meningitis of this kind assume a very threatening form, and set in with the most violent pains and an almost furious delirium. In almost all these cases I have derived the best and speediest results from the use of *Bellad.*, to which I prefer *Bry.* only if the delirium is milder, and the pains are severe, shooting and tearing pains. In one case where *Bry.* seemed powerless, *Glon.* afforded rapid relief, and in another case with convulsions and lockjaw, *Cupr.* After suppressed **eruptions,** *Apis*, according to my experience, deserves very properly and in every respect a preference over *Bell.*, as one of our most efficient curative agents; cerebral irritation consequent upon **sunstroke** yields to *Glon.*, more speedily than to *Bell.*, which is here likewise of great use. [The most efficient treatment for sunstroke is to rub the patient very hard with pieces of ice until the skin begins to burn and consciousness returns, after which *Acon.* or *Bell.* may wind up the treatment. H.] With these two remedies I have so far succeeded in curing every case of sunstroke that has occurred to me in

my practice, so that I have never been obliged to resort to *Camph.* or *Lach.* If **erysipelas** invades the cerebral membranes, and *Bell.* does not afford immediate relief (in twelve hours), nor *Bry.*, I generally give *Cupr.*, with the best result, and have succeeded in a most surprising manner not only with the 30th but likewise with the 200th attenuation, especially if this remedy was indicated by convulsions of the extremities.

In **tubercular** meningitis which is almost always certain to exist if, in the case of young people who are affected with tubercles in the chest and abdomen, a violent fever with headache and delirium sets in, and neither typhus nor an acute exanthem can be diagnosed, neither *Bellad.* nor *Bry.* is of the least use, any more than *Nux vom.*, which is only seldom indicated. The only remedies which can do any essential good in such a case, provided any thing can at all be accomplished by treatment, are *Calc. carb.* and *Phosph.* Having lost in the first years of my practice two young patients whom I had treated for tubercular meningitis with *Bellad.* and *Bry.*, I lately treated a similar case with *Calc.* 30th, three globules in water, a teaspoonful every three hours, until health seemed restored, and in another case I wound up the cure with *Phosph.*, which I gave for the remaining pains. If the disease is not correctly diagnosed at the commencement and the inflammation is allowed time to reach the climax of its development, *Calc.* will no longer afford any help, nor will any other remedy.

**Meningitis of Children.**—This disease which is so apt to run into acute hydrocephalus, is curable by homœopathic means under almost any circumstances as long as it still retains the form of meningitis and the physician recognizes its true character at the outset. Under a proper treatment all danger to life sometimes disappears in 48 hours. Only no time must be lost with *Aconite*, which has never been of the least service to me, but *Bellad.* 30th, has at once to be given, a teaspoonful of a solution of three globules in water every three hours. In most cases a decided improvement will be noticed even after the lapse of only twenty-four hours, and not unfrequently this remedy alone will be found sufficient to completely restore the patient's health. If the physician is called too late and effusion has already begun to set in, *Bellad.*, will sometimes fail us; in such a case I approve, with the fullest conviction, of Wahle's recommendation of *Bryon.* 30th one globule

dry on the tongue, and still more of *Sulph.* 30th administered in the same manner, which has altogether rendered me most efficient service in the meningitis of children. It should be remembered that *Sulph.* does better after several other remedies had been given first, than when the treatment is begun with this agent. If the disease has entered upon its third stage, that of fully-developed effusion, not much can be expected either of *Bellad.* or *Bry.*, but, unless it should be too late to do anything for the patient, a great deal may yet be accomplished by means of *Helleb.*, which has likewise been recommended by Wahle; and still more certainly by *Sulph.*, and perhaps by *Apis*, which, in one case at least, where I had given up all hope of saving the little patient and only gave this remedy as a last resort, had such a marked effect that a single dose of *Sulph.* proved afterwards sufficient to restore this very sick child to perfect health.

**Remarks on a few remedies** that have been recommended in the preceding chapter. **Aconitum.** As far as my experience goes, this remedy will never accomplish much in idiopathic meningitis, of children. It has however a decidedly beneficial effect in cerebral irritations from teething or worms, where it often effects the speediest and most striking improvement, even if the symptoms are ever so threatening, such as furious delirium, violent vomiting, intolerable headache and burning fever. **Apis.** As regards the distinguished curative powers of this agent in cerebral affections occasioned by suppressed exanthems, especially **urticaria,** I am likewise prepared to confirm it by a variety of practical trials. **Bellad.,** undoubtedly the most comprehensive and efficient remedy in all kinds of irritations and inflammations of the brain and its membrances, which should always be our first choice except solely in tubercular meningitis and in hydrocephaloid conditions of the brain, provided *Bryon.*, *Cupr.*, *Hyosc.* or *Stramon.* are not more specially indicated. **Bryonia,** very often indispensable after Belladonna if pains remain which this agent was not able to subdue; likewise at the beginning, if violent lancinating pains shoot through the head from one side to the other, whereas *Bellad.* corresponds more to throbbing and hard, aching, pressing pains; whether, as Wahle thinks, the complexion in such cases is brown-red or, on the contrary, pallid rather than any other color, is of very little material consequence in such cases. **Calcarea.**

What this remedy is capable of accomplishing, not only towards removing the remnants of an hydrocephaloid, but likewise in tubercular meningitis, exceeds all description; in the latter it is more particularly efficacious in the 200th attenuation. **Camphora.** Although recommended by Noack and Trinks as a panacea for cerebral irritation from sunstroke, yet those who know how to use *Bellad.*, *Bryon.* and above all *Glonoin*, for this condition, will never find it necessary to have recourse to this uncertain remedy. **Cuprum.** One of the most admirable brain-remedies, if indicated by spasms in the fingers or toes, oppression on the chest, lockjaw. If the cerebral disease develops itself after suppression of erysipelas or some other eruption, or even after suppressed catarrh or during the process of dentition, I prefer *Cuprum* to *Belladonna.* **Glonoin.** Undoubtedly the most distinguished remedy for cerebral irritation from sunstroke. Notwithstanding this remedy possesses extraordinary curative powers in several forms of nervous headache and passive congestions of the brain, yet not much ought to be expected from it in truly idiopathic meningitis, whereas I have given it to children as well as adults with excellent success in several cases of cerebral typhus, the so-called *fièvre cérébrale* of the French, provided of course the symptoms indicated this remedy, one of which, for instance, is a painful feeling of fullness in the head, which is aggravated by **shaking** the head. *Mercurius.* Although this remedy may afford a good deal of help in the acute meningitis of children, I would not advise a physician to lose even a moment's time with this remedy before *Bell.*, *Bryon.* and more particularly *Sulph.* have been tried without any favorable results whatsoever. *Opium.* Although this remedy may, like *Hyosc.* and *Stram.* prove an excellent intercurrent remedy in many cases of cerebral irritation as a means of moderating the cerebral congestions, yet *Opium* will, no more than the two last-named remedies, be able in the least to arrest the inflammatory process in idiopathic meningitis; beginners especially will do well to make a note of this. *Pulsatilla.* If the brain has become irrirated by a metastatic suppression of coryza, otorrhœa or any other blennorrhœa, this remedy will, in *such cases only*, accomplish every thing that it is possible to do by a restoration of the original discharge; if this restoration does not take place in 24 to 48 hours, it will be absolutely useless to expect any thing of this remedy. *Sulph.*, as has already been stated in previous paragraphs, this remedy cannot often be replaced by

another, not only in desperate cases of acute hydrocephalus, but more particularly in cerebral irritations from suppressed measles, scarlatina or other exanthems, and is often indispensable even while these exanthems are on the point of breaking out. In many cases of this kind the cerebral irritation was not only subdued in less than twenty-four hours, but the whole course of the disease was so utterly divested of all danger that no other treatment was required than to continue the watery solution of three globules of *Sulph.* 30th, from three to six teaspoonsful a day. *Zincum.* The remarks which Hartmann offers in his Therapeutic Manual on the appropriateness of *Zincum* in the stage of irritation, do not coincide with the results of my own experience; on the other hand I have found this agent eminently useful in **paralytic** and **dropsical** conditions of the brain, especially when consequent upon **exanthematic** fevers, not only in the 30th, but likewise in the 200th attenuation; if the remedy is otherwise strictly homœopathic to the symptoms of the disease, these high attenuations improve the case faster than the second trituration. I skip other remedies which have been employed by some practitioners according as occasion might require, such as: *Artemisia*, *Carbo veg.*, *Cina*, *Conium*, *Digit.*, *Ferrum*, *Lachesis*, etc. which I have never yet been required to use even as intercurrent remedies, although I do not mean to deny that these remedies as well as a number of others, if indicated by the symptoms of the case, may render a valuable but passing aid in cases of a peculiar type or character.

## 4. Hydrocephalus.

1. I have already stated in the preceding article my views concerning the most appropriate treatment of the acute hydrocephalus of children, so that nothing remains for me to do in this place except to offer a few remarks on the so-called hydrocephaloid which has been discussed by Schweickert, and which Marshall Hall has been the first to distinguish from acute hydrocephalus.

2. The first case of hydrocephaloid which I had an opportunity of observing, was in the case of a very much reduced child of 15 months. On account of the persistent green-slimy diarrhœa, the slightly dilated pupils and the very rapid pulse, I regarded it as a **secondary** or rather **consecutive exhaustion** of the brain, super-

induced by a long-lasting abdominal affection, and I sought to control it by operating against the abdominal rather than against the cerebral symptoms. I treated this affection at first with *Sulph.* 30th, which seemed to ameliorate the condition to some extent without, however, producing a decided effect. The green stools especially resisted this treatment, although the sopor seemed to abate somewhat; the symptom recorded under *Phosph.*, "green stools in the case of an infant" induced me to prescribe *Phosph.* 30th, three pellets in solution, a teaspoonful every three hours. The result surprised me so much more as, on account of the general cerebral exhaustion and the chronic abdominal affection occasioning the former, I had condemned the case as utterly hopeless, whereas every symptom improved so signally in 24 hours that I did not hesitate to continue the *Phosph.* for two days longer at more extended intervals. Inasmuch as copious white-slimy evacuations continued, I gave *Calc.* 30th, two globules dry on the tongue, this remedy being my main reliance in chronic diarrhœa, more particularly in that of scrofulous children, which likewise in this case removed every remaining trace of the disease in a very few days. Afterwards, when I became acquainted with Schweickert's article on the diagnosis and treatment of hydrocephaloid, I learned the true nature of the case with which I had had to deal. In all my subsequent cases of this disease I have always succeeded in effecting a cure with *Phosph.* and *Calc.*, only in two cases, where *Phosph.* did not seem sufficient to improve the condition of the brain, I have had to resort to *Zinc.*, the 30th attenuation of which afforded me all the assistance that this medicine is at all capable of. This disease can only be confounded with acute hydrocephalus in the second stage of that disease; in such a case the **green-slimy** evacuations, more especially the coolness of the head and of the extremities ought to engage the physician's attention, and further investigations of the anamnestic circumstances of the disease, of its commencement and progress, ought to clear up every doubt. This disease is never preceded by meningitis, as is the case with acute hydrocephalus; here all the symptoms point to consecutive cerebral exhaustion, and even the quick, small and feeble pulse and the cool skin only indicate extreme debility with absolute exclusion of every active inflammation. [*Bellad.* and the *Sulphate of Atropine* should not be forgotten in this disease. H.]

3. **Chronic Hydrocephalus.**—What *Sulph.* and *Calc.* 30th are capable of accomplishing in this not very unfrequent disease, which may attack scrofulous children as well as develop itself after the removal of tinea capitis by external means, is incredible. In three cases which I have had to treat I have cured the whole affection with these two remedies; and in two other cases where the hydrocephalus had been caused by the suppression of tinea I have seen this eruption reappear under the use of *Arsen.*, attended with great decrease of the hydrocephalic effusion, the rest of which, together with the tinea, was afterwards completely removed by *Calc.* What *Helleb.* and *Bell.* are capable of accomplishing in this disease is unknown to me, since the above-named remedies have always proved sufficient in my hands. But they must not be given in alternation, nor in too rapid succession one after the other; each remedy must be allowed its full time to act. My usual custom is to give the patient for eight days morning and night a teaspoonful of a solution of a few globules in water, or else I administer three doses of three globules 30th, each in the space of eight days, giving a dose dry on the tongue every other day, after which I await the result and give no more medicine as long as any improvement is perceptibly going on.

### 5. Softening of the Brain. Ramollissement.

This disease, which it is so difficult to recognize during the lifetime of the patient and which reaches its full development only in old age, most commonly manifests itself years previous by equally characteristic and suspicious symptoms, which the practical physician cannot heed with sufficient attention, for the reason that, if acted upon at the outset, *Phosph.* and *Calc.* may afford important relief from, and even cure the whole disease. The following have always appeared to me suspicious symptoms: First, a seated, more or less continuous and sometimes exceedingly violent headache which, during the further progress of the disease becomes associated with a decrease of the mental powers, slowness in answering, frequent paroxysms of vertigo and a more or less reeling gait, not unfrequently one foot being dragged after the other. If formication, numbness and weakness supervene, or more or less severe pains in the extremities of the side of the body opposite the affect-

ed side of the head, I never hesitate to at once commence the treatment with *Phosph.* 30th, of which I either give three doses of three globules each, dry on the tongue, during a period of eight or ten days, or else dissolved in water, a teaspoonful morning and night, after which I await the result until no further sign of an improvement is apparent. By pursuing this course I have succeeded in several cases where the patients were from 40 to 50 years old, and a semilateral diminution of the senses and an incipient paralysis of the extremities had already set in, in almost effecting a complete cure in from four to eight weeks, after which *Calc.* generally took away the last remnant of the disease. In a case where neither *Phosph.* nor *Calc.* effected any essential change for the better, I have obtained tolerably favorable results by means of *Sepia*, and likewise by means of *Laches.* which after all, is however vastly inferior to *Phosph.* In this affection *Sulph.* accomplishes little or nothing; in a case of this kind, where the patient was a man of sixty years old, *Graph.* removed speedily and permanently the frequent attacks of vertigo to which this patient was subject and which had defied every other remedy; the attacks were attended with a disposition to **fall forwards** and were otherwise accompanied with stupefaction, nausea and a desire to lie down. So far as age is concerned, it is a certain fact that, although the disease is susceptible of a radical cure in middle-aged persons, the prognosis is exceedingly unfavorable after the patients have attained the age of 60 and beyond, and that all that the physician can expect to accomplish is confined to postponing the inevitable end for a short period of time. If in the case of persons of this age, symptoms of general dropsy set in, or a rapid succession of apoplectic attacks which are most commonly of a serous or nervous character, the end is inevitably near, and, even if we succeed in controlling the first or second attack, the third attack invariably ends in death, sometimes in a few hours. I may be permitted, in this connection, to mention the case of a savant 70 years old whose senses had already become greatly impaired and who had almost completely lost the use of his speech, whom I had succeeded in restoring from an attack of cerebral congestion when a second attack took place a whole year after the first; he had a third attack in the third year, which I already flattered myself I had succeeded in controlling, when another attack set in eight days after the former which proved much more obstinate in yield-

ing to treatment; another attack took place eight days after, to which the patient had already succumbed when I entered his house. In a similar case, where the patient was 63 years old, and one side of whose body had gradually become entirely paralyzed, a gangræna senilis, which broke out at the toes at intervals of six months, yielded to *Arsen.* 30th, not once, but three times whenever the gangrene made its appearance, whereas the general condition of the patient remained the same, until he finally died a year later of general dropsy which no remedy was adequate to remove.

## CHAPTER III.

## HEADACHE.

### 1. Symptomatic Headache.

1. It must be a difficult task for a beginner to find in our present Repertories the right remedy even for the simplest headache among the multitude of symptoms recorded in those works. Nevertheless those symptoms are of inestimable value to the practitioner who knows how to avail himself of them and to discover the point of importance in the series. The chief cause of this difficulty of finding the right remedy, is this, that except **hemicrania**, of which we shall speak hereafter, there are no really idiopathic headaches, but only such as constitute mere symptoms in the symptomatic series of other diseases, such as catarrh, rheumatism derangement of the stomach, nervous irritation, or prostration,, disturbances in the circulation etc. The former classification of headaches as **catarrhal, congestive, rheumatic, arthritic, gastric, nervous**, etc. is not by any means founded in error, and, inasmuch as a true knowledge of the cause is of great importance in selecting a remedy, the above mentioned classification is likewise of great value to a homœopath, more especially if he at the same time pays particular attention to the **aggravating** or **ameliorating** circumstances, and finally, to the **accompanying** ailments or complications. In this manner the selection of a remedy can both be facilitated and be almost reduced to a certainty. Taking these points for granted I here offer a few directions which I have followed for years in treating the various kinds of headache.

2. **Catarrhal Headache,** attended with, or after suppressed coryza. If the suppression of coryza is attended with aching pains and a sensation of a heavy weight in the forepart of the head and a troublesome feeling of obstruction in the nose, I

always first give *Nux vom.* which is very apt to remove this whole condition in a short time. If the pains are more tearing and stitching, especially in the supra-palpebral region, or even in the malar bones, and a thick mucus is discharged from the nose, I know of no better and more speedily curative remedy than *Bry.* If the coryza is entirely suppressed and the suppression gives rise to a maddening headache, *Acon.* often helps very speedily, likewise *Bellad.*, especially if the skull seems as if it would fly to pieces. If such a headache is very much aggravated by the least breath of air or current of wind, *China* has a good effect, more particularly if the scalp is very sensitive to contact. Otherwise I give, in every case with febrile excitement and without any other special indications, a dose of *Acon.*, no matter whether the headache increases or not in the open air; this remedy either removes the headache entirely or relieves it so that the remaining symptoms always point to a more special remedy, such as *Nux vom.*, *Bry.* or *Bellad.*

3. **Congestive Headache.**—If the patient's face is flushed, the eyes look red and the pains are severe, *Acon.* is always my chief remedy, even if more or less violent delirium supervenes; this remedy generally changes the condition of things so satisfactorily that *Bellad.*, *Nux vom.* or *Bry.*, will easily remove the remaining pain. If the head is heavy and full as if it would burst, with pallor of the countenance and irritable temper, and the pain in the head is aggravated by shaking or moving the head, I generally give *Bry.* with the best result; if the same condition of the head is improved by motion and aggravated by rest, I give *Rhus tox.* If the headache is accompanied by a violent throbbing of the carotids, a dull pressure and sensation of fullness in the head, with disposition to sleep, I know of no better remedy than *Bellad.*, which remains the best remedy even if threatening symptoms, such as loss of consciousness, muttering delirium, distortion of the mouth, twitching of the corners of the mouth etc. supervene during a congestive headache of the above described kind. If such a headache is attended with pain and stiffness in the nape of the neck, *Bellad.* affords certain help unless the pain should result from suppression of hæmorrhoids or from abdominal plethora, in which case, especially if the headache sets in early in the morning or after a meal, *Nux vom.* is the sovereign remedy. If a similar headache sets in after menstrual suppression, I have derived great

advantage not only from *Puls.*, but likewise from *Acon.* and no less from *Bellad.* *Glonoin* has been more recently employed by me with the best results for a most excruciating headache which **shaking** the head aggravates even unto the degree of maddening frenzy. For habitual **congestions** of the head, with hammering, **throbbing** or dull-pressive pains in the interior of the brain, either during or between the menses, especially if they are habitually profuse, *Calc.* 30th is regarded by me as one of the most efficient remedies for the removal of these pains, a dose of three globules to be given every two, three or four days, and the medicine subsequently to be allowed to act for some length of time. *Silic.* is equally useful for nocturnal, throbbing headache as if the head would burst, with heat in the forehead and a heavy pressure in this region as if the brain would burst out of the forehead, more particularly if these attacks have already continued for some time.

4. **Gastric Headache.**—For this headache, if attended with nausea or vomiting, and no special counter-indications are present, my first recourse always is to *Ipecac.*, let the tongue be clean or coated; if the headache can be positively traced to gastric derangement occasioned by the use of fruit, acids or fat, I then prescribe according to circumstances *Puls.*, *Arsen.*, or *Antim.;* for headache caused by hard drinking and nightly carousing I consider *Carbo veg.* full as efficient as *Nux vom.*, which has often left me in the lurch in such cases [probably because Jahr gave too high a potency. A man had drank 39 glasses of bad whiskey over night; next day he had lost his sensibility, trembled all over, the skin felt like parchment, the pulse was small and wiry, the man felt as if he would die, in the greatest agony. I gave him *Nux* 30th for an hour without the least improvement; I then gave him five drops of the tincture in half a goblet of water. In a few minutes he began to perspire; all day he was drenched in perspiration which smelt like alcohol; next day he felt a little weak but was otherwise quite well, ready for another debauch. H.] If the headache is accompanied by constipation and consequent rush of blood to the head, and the pains are aggravated by thinking, as if the head would fly to pieces, and increase in the open air and after eating, I always give *Nux vom.* with the very best result; *Bry.* on the contrary, if there is no nausea and, when the head is bent for-

ward, the patient experiences a sensation as if the brain would fall but at the forehead. I can likewise recommend *Cyclamen* as one of the most excellent remedies for headaches that are attended with vomiting, and which are not, like hemicrania, of a neurotic character, but originate in the stomach and in an evident weakness of digestion. As regards Hering's statements concerning *Verat. alb.*, for headaches supervening during obstinate constipation, I am able to confirm them insofar as I have tried *Veratr.* with success in several cases where the vomiting and nausea were associated with **constrictive** pains in the throat and head, together with a similar sensation in the region of the stomach. *Arsen.* and *Asar.* and likewise *Sulph.*, have often rendered me excellent service in headaches of this kind, but if Rueckert in his synoptical list of remedies likewise records *Acon.*, *Calc.*, *Coloc.*, *Ignat.*, *Sanguin.* and *Sepia*, among the remedies for gastric headaches, I admit that I have frequently found these remedies indicated in true hemicrania where nausea and vomiting occur only after the hemicrania has reached the acme of intensity, but never in headaches where nausea and vomiting occur at the outset of the attack, or even before the headache has set in, an evident sign that in this case, as in the two former cases, the headache is only a consensual phenomenon. It may likewise be stated that, beside true hemicrania, there are many other kinds of headache which, without originating in gastric disorder, have nausea and vomiting among their consecutive phenomena, such as **arthritic, nervous** and more particularly **hysteric** headaches.

5. **Rheumatic Headache.**—For rheumatic headache, which is never accompanied by vomiting, as arthritic headache so often is, nor so deeply boring in the brain as the latter, but is distinguished by shifting from place to place, *Merc.* is one of the most efficacious remedies, especially if the tearing, burning and stitching pains rage more particularly at night, while the patient is lying in bed. Next to *Merc.* we have *Puls.*, especially in the case of women with scanty menses and disposition to leucorrhœa, and if the pains are more violent in the evening from 5 to 10 o'clock, most commonly invade one side of the head, and hence extend to the ears and teeth. *Cham.* is likewise an excellent remedy if the headache arises from suppressed perspiration, or if the opposite is the case, and the hairy scalp is covered with

warm sweat. If the tearing and digging pains extend to the face and temples, or to the nape of the neck and arms, *Bry.* has often afforded me essential aid, especially in the case of men of irascible dispositions, and who are subject to frequent attacks of pain in the joints. If the headache is relieved by the vomiting, which may happen to supervene, *Nux vom.* sometimes proves an efficient remedy, or one of the remedies that have been recommended for arthritic headache, especially *Sepia* or *Spigelia.* I have likewise given *Thuja* with great success for this kind of headache, more particularly if the face and malar bone were invaded by the pain and an exacerbation of the headache took place in the morning or about three or four o'clock in the afternoon.

6. **Arthritic Headache.**—This form of headache must not be confounded with hemicrania nor with rheumatic headache. It neither runs such a definite course as the former, nor does it affect the external tissues as the latter, but most generally shows itself like a severe boring or stitching tearing deep in the brain, which is relieved by the supervention of vomiting, and is sometimes momentarily and even very speedily alleviated by *Nux vom.*, if the headache is attended with retching; by *Ipecac.*, if merely attended with violent nausea; and by *Bry.*, if the patient belches up a good deal of wind; nevertheless the main remedies are *Sepia*, *Spigel.*, and in some cases *Coloc.*, especially if the pains are felt more on the left side and last from early morning until late in the afternoon, accompanied by great anxiety and restlessness.

## 2. Idiopathic Headache.

These are the nervous pains which are classed by many authors with **megrim** under the names of **megrim, hemicrania, nervous headache, sick headache** etc., although they widely differ from each other in their essential characteristics. The only features they have in common are that they all affect **one side of the head,** occur in more or less **periodical paroxysms,** and are generally attended with **vomiting.** Having just treated of arthritic headache, all that remains for us to do here is to devote a few lines to **megrim,** to **neuralgic** and to simple **nervous** headache.

1. **True Megrim.**—This is nothing else than a true neurosis, like epilepsy, eclampsia and other spasmodic attacks, not proceeding from the stomach like gastric headache, but irritating the stomach after the megrim has reached its height. Moreover, the course of single paroxysms, independently of differences in their duration, from 24 to 36 hours, is in all cases the same insofar as every attack sets in quite suddenly, after which there is a regular increase, vomiting is frequently excited at the point of culmination, after which the attack decreases again with equal regularity and finally disappears without leaving a trace behind until the next paroxysm. It is remarkable that *Bellad.*, *Nux vom.*, *Calc.*, even *Ignat.*, the last-named especially in the case of hysteric females, likewise *Sulph.* and *Silic.*, and other anti-epileptic remedies have, in my practice, afforded **more permanent** relief in this headache than *Sepia* and *Spig.*, both of which seem to me better adapted to hemicrania than to true megrim, in which disease, however, they sometimes act like excellent **palliatives.** In all cases of megrim that have come under my treatment so far, I have always and unhesitatingly commenced the treatment with *Bellad.*, if the pains were most violent on the **right** side of the head. On the contrary, if the pains are worse on the **left** side, if the patient is more sensitive to noise than to light, I regard *Spigelia* as a very good remedy, more particularly if the pains commence early in the morning and then increase until noon; but if this remedy does not afford speedy relief, I change to *Nux vom.*, *Stann.* or *Sulph.* In megrim of the right side I have likewise derived momentary benefit from *Sanguinaria* and *Sepia*, the former especially if the patient complained as if the eyes would be pressed out and as if the head would fly to pieces, and *Sepia*, if the pain over the right eye was a stinging and boring pain and made worse by a thunder storm, cold air and a north wind. In such cases I care very little for the **kind** of pain; only if the patient complains of an undulating motion in the head as if full of water, with a feeling of coldness in one side of the face, and *Bell.* does not afford any relief, I am able, with others, to commend *Plat.* as possessed of fine curative powers in such a case. In another case where the headache was increased to an intolerable degree by walking, stepping too firmly, shaking the head, *Glonoin* affords speedy relief; *Calc.* however, if otherwise indicated, seemed to afford more permanent relief than any other medicine, more especially in cases where an

eruption on the scalp had been suppressed during youth, and the pain was a hammering or boring pain, with a feeling of coldness about the head. I have never been able to give any permanent relief by means of *Acon.*, *Merc.* and *Hep. sulph.*, which are likewise recommended in this form of headache, but which seem to me more suitable for **neuralgic** headache than for true, **spasmodic megrim.** On the other hand I have seen a radical cure follow the use of *Silic.* in a case where the attacks were accompanied by loud cries, nausea increasing even unto fainting, and subsequent obscuration of vision.

2. **Neuralgic Headache.**—What this form of headache has in common with megrim is that it likewise occurs **periodically,** most commonly affecting only one side of the head and likewise tending in some cases to excite vomiting. The course of the headache never ends with one paroxysm alone, but, after the headache has once begun, the paroxysm generally recurs at the same hour for several days in succession, sometimes with all the regularity of an intermittent type. For this kind of headache, *Spigelia* is, besides *Nux vom.*, one of the most distinguished remedies, especially if the pains, as we stated above, affect more particularly the **left** side of the head, break out at night or in the forenoon, involve more especially the eyes, with a sensation as if these were too large, or spread over the whole side of the face as far as the teeth and nape of the neck; whereas *Nux vom.*, which is likewise appropriate for an early morning headache, is particularly indicated, if the pains begin like racking stitches on one side of the head over the sockets or root of the nose and, after having reached the climax, give rise to sour vomiting and almost drive the sufferer to madness, or deprive him of his consciousness; at the same time all the senses are keenly affected and susceptible to impressions. Next to these remedies we class *Coloc.* for violently tearing, crampy pains, mostly **on the left side,** more especially if the headache had been excited by a fit of vexation or mortified feelings, and is aggravated by stooping, lying on the back, moving the eyelids and shaking the head. In such cases I have occasionally employed *Bell.*, *Bryon.*, *Cham.*, *Acon.* and *Sulph.*, with much success, especially if the pains were localized in the region of the eyebrows, with bitter vomiting and pallor and coldness of the face during the attacks; *Bry.* helped me in one case characterized by severe

tearing and burning in the right temple and side of the forehead; the attack had been excited by a violent fit of anger, began early in the morning and raged most fiercely at night; *Cham.* for a violent **tearing** in the **left** side of the head; *Acon.* for crampy stinging pains over the root of the nose, with excessive nervousness, excessive sensitiveness to odors and a most distressing apprehension of dying; *Sulph.*, for severe digging and stitching pains over the left eye, setting in in the evening and reaching their highest degree of intensity in the night.

3. **Nervous Headache.**—This form of headache, which occurs most frequently among hysteric and hypochondriac individuals, and among persons who had become debilitated by excesses or losses of vital fluids from any other cause, is distinguished from megrim and neuralgia of the head principally by the circumstance that it is not governed by fixed periods or types, but breaks out at indefinite intervals and is excited by almost any special cause, such as emotions, mental exertions, the menses, after which the headache continues for a longer or shorter period. It is not always easy to find a suitable remedy for this form of headache, although the number of those that have proved the most efficient in my hands, is, upon the whole, quite limited. In the first rank I place *Acon.* for hysteric headache, which is exceedingly aggravated by hearing other people talk, with extreme sensitiveness to noise and motion; *Aurum* for a headache as if the brain had been bruised and increasing from the least mental effort or attempt to think until the ideas become utterly confused or jumbled up; *Bellad.* for the roaring and undulating sensations in the heads of hysteric females, with aggravation of the pain by every noise and even hearing other people tread, together with extreme sensitiveness of the outer head; *Chamomilla* for a sensation of weight over the root of the nose, after partaking of coffee contrary to custom, or in the case of inveterate coffee-drinkers; *China* for a nightly headache of debilitated people, or for a sensation as if the brain felt bruised, worse whenever he moves about or even opens his eyes, with painfulness of the scalp even if the hair is simply touched; *Coccul.* in the case of hysteric females or at the time of the menses, if the head feels hollow and empty; *Coffea* for pains as if a nail had been driven into the side of the head, or as if the brain had been smashed, sometimes the pain is maddening, with moaning, cries, lamentations;

*Ignat.*, especially in the case of hysteric persons, with pressure over the nose, or distress as if a nail had been driven into the sides of the head, with photophobia, and emission of a copious and pale urine, especially if the pain is momentarily relieved by a change of position and drinking a little coffee; *Nux vom.*, especially in the case of literary men and persons who lead a sedentary life, with an aching pressure in the forehead and generally commencing early in the morning; likewise for pains as from a nail in the head, in the case of coffee-drinkers, hypochondriac and hysteric females, aggravated by eating, bright light, noise and open air; *Platina*, especially in the case of females who menstruate profusely, for a violent crampy pain over the root of the nose, during which every object looks smaller; *Sepia* in the case of delicate, sensitive women, with scanty menses, for a drawing, tearing and stinging distress on one side of the head, with great sensitiveness to contact and motion, and disappearance of the pains during sleep; finally *Silic.* which has proved very serviceable in my hands for headache caused by excessive studying, with a vibratory **shaking** sensation in the head when stepping hard, and a tension in the forehead and eyes.

4. I add a few **general** indications together with the remedies that have seemed to me to correspond with the former most specially and seem to be **characteristically** pointed out by the accompanying symptoms:

A **swashing sensation** in the brain as from water; *Bell.*, *Plat.* **Roaring** and buzzing in the case of hysteric persons: *Aur.*, *Bell.* **Wavering** or balancing sensation in the brain: *Nux vom.* Brain as if **smashed,** bruised, torn: *Aur.*, *Nux vom.*, *China*, *Verat. alb.*, *Coff.* **Digging** and boring: *Sep.*, *Spig.*, *Sang.*, *Ignat.*, *China.* **Ulcerative** pain: *Puls.*, *Sepia.* Pain as if **in a vice**: *Puls.*, *Verat. alb.*, *Sulph.* **Clawing,** crampy pains: *Acon.*, *Coloc.*, *Plat.* Pain as from a **nail** in the head: *Ignat.*, *Coff.*, *Nux vom.* **Beating,** hammering: *Acon.*, *Ignat.*, *Cham.*, *Sep.*, *Calc.*, *Sulph.* Sensation as if **flying to pieces**: *Bry.*, *China*, *Merc.* **Pressing out** sensation: *Bry.*, *Ignat.* Sensation of **emptiness** in the head: *Cocc.*, *Puls.* **Pressing** pains: *Coff.*, *Ignat.*, *Cham.*, *Nux vom.*, *Bry.*, *China.* **Tearing** pains: *Bry.*, *Cham.*, *China*, *Coloc.*, *Merc.*, *Puls.* **Stitching,** stinging pains: *Bry.*, *Cham.*, *Coloc.*, *Acon.*, *Sep.;* for shooting pains from **within outwards**: *Ignat.* **Intolerable** vehemence of the pains: *Acon.*, *Coff.*, *Cham.* Pains **extorting cries**: *Sep.*, *Acon.*, *Coff.*, *Cham.*, *Verat. alb.*, *Silic.* Pains compelling one **to lie down**: *Nux v.*, *Coloc.*, *Sang.*, *Silic.*

If the head cannot **bear being touched** ever so lightly: *Bry.*, *China*, *Coloc.*, *Sep.*, *Sulph.* If even the **hairy scalp** is painful: *Bell.*, *China*, *Verat. alb.* If **motion** aggravates: *Bry.*, *China*, *Nux v.*, *Sepia*, *Acon.*, *Sulph.* When the **eyes** are **moved**: *Bell.*, *Bry.*, *Puls.*, *Sep.*, *Coloc.*, *Nux vom.* When **opening** the eyes: *China*, *Sep.* When **rising** from a recumbent posture: *Verat. alb.* Worse when **stooping**, *Bell.*, *Bry.*, *Nux v.*, *Coloc.*, *Puls.*, *Spig.* Aggravated by **sitting**: *Puls.* Aggravated by **walking**: *Bry.*, *Nux v.* When **walking** in the open air: *Ignat.*, *Calc.* When **shaking** the head: *Glon.*, *Nux vom.* From **other people's talking**: *Acon.*, *Bell.*, *Sep.*, *Spig.* When **treading**: *Bell.*, *China.* Aggravated by **noise**: *Acon.*, *Coff.*, *Bell.*, *Bry.*, *Sep.*, *Spig.* From **music**: *Coff.* Aggravated by **light**: *Acon.*, *Ignat.*, *Puls.*, *Nux v.* Aggravated by **open air**: *Nux v.*, *Sulph.*, *Calc.*, *Spig.*, *Coff.*, *China.* Aggravated when **lying on the back**: *Coloc.*, *Verat. alb.* Worse by **eating**: *Ignat.*, *Nux v.* From **coffee**: *Ignat.*, *Nux vom.* If the pains set in in the **evening**: *Puls.*, *Coloc.*, *Ignat.* After **lying down** in the evening: *Ignat.* **At night**: *China*, *Sulph.*, *Silic.* In the **morning**: *China*, *Ign.*, *Nux v.*, *Spig.* In the **afternoon**: *Coloc.*

Moreover, if the pains **improve**, when **closing the eyes**: *Sepia*, *Calc.* When **bandaging** or compressing the head: *Puls.*, *Sep.*, *Calc.*, *Nitr. ac.* In a **recumbent** posture: *China*, *Sep.*, *Calc.* When **stooping**: *Ignat.* During **rest**: *China*, *Sep.*, *Spig.* During **sleep**: *Sepia.*

Again, according to the **locality**, if the pains are principally felt on the **right** side, *Bell.*, *Sep.*, *Sang.*, *Calc.* If principally on the **left** side, *Coloc.*, *Acon.*, *Sulph.*, *Spig.*, *Nux v.* If the pains are felt over the **root of the nose**, *Acon.*, *Ignat.*, *Plat.* Over the **eyebrows**, *Bell.*, *Nux v.* In the **temples**, *Bell.*, *Cham.*, *China.*, *Ignat.*, *Nux v.*, *Puls.* On the **vertex**, *China*, *Sulph.*, *Calc.* Deep in the **brain**, *Bry*, *Ignat.*, *Sep.*, *Calc.*, *China.* In the **occiput**, *Sulph.*, *Puls.*, *Sep.* In the **forehead** and sinciput, *Bell.*, *Bry.*, *Coloc.*, *Ignat.*, *Nux v.*, *Plat.*, *Sulph.*, *Calc.*, *Sep.*, *Silic.*

Finally, if the pains are attended with **anxiety**, restlessness, being beside oneself: *Acon.*, *Coff.*, *Cham.*, *Nux v.*, *Verat. alb.* If the pains are **maddening**: *Acon.*, *Nux v.*, *Verat. alb.* If accompanied by **apprehension of dying**: *Acon.*, *Plat.* If **tumors** form on the head, *Hep.*, *Silic.* If accompanied by **falling out of the hair**: *Sulph.*, *Silic.* **Sweat of the head**: *Cham.*, *Calc.*, *Silic.*. **Vertigo**, *Nux v.*, *Puls.* **Buzzing in the ears**: *Puls.*, *Bell.* **Obscuration of sight**: *Ignat.*,

*Puls.* **Pallid face**: *Ignat.*, *Puls.*, *Nux v.*, *Bell.* **Flushed face**: *Bell.*, *Acon.*, *Nux v.* **Redness** of only **one** cheek: *Chamom.* **Bloated face**: *Chamom.* **Nose bleed**: *Acon.*, *Bry.*, *Puls.* **Nausea** without vomiting: *Ign.*, *Puls.*, *Sulph.* **Vomiting**: *Bellad.*, *Sep.*, *Nux v.*, *Puls.*, *Sulph.*, *Sang.*, *Calc.*, *Bell.* **Diarrhœa**: *Verat. alb.* **Spastic urine,** during the attack: *Ign.*, *Coloc.* **Palpitation of the heart**: *Puls.* **Chilliness,** *Puls.* **Syncope** with **coldness,** and cold sweat: *Verat. alb.* Great tendency to **start**: *Ignat.*

## Falling out of the Hair.

It is very difficult to institute careful observations on this point; a restoration of the growth of the hair generally takes place so slowly that we cannot tell whether this result is due to time or to the efficacy of the remedial agents that had been employed in the case. In a case of complete falling out of the hair not only of the scalp, but likewise of the eyebrows, consequent upon an inveterate mercurial treatment in the good old allopathic fashion, I succeeded in restoring the hair very rapidly by means of *Aurum*, followed by *Graph.* and *Hep.*, where *Aur.*, however, contributed most towards a cure.

Single *bald* spots, especially behind the ears, I have seen perceptibly improved by *Phosph.;* if gnawing grief and sorrow change the hair of young people to *grey*, I have seen a change for the better effected by *Phosph ac.; Lycop.* has proved equally beneficial if the loss of hair was attended with a good deal of itching and scales on the head, for which condition *Bry.* and *Calc.* have rendered excellent service in my hands, and no less *Kali carb.*, if the hair was at the same time very dry and wilted.

Rosenberg's observations quoted in Rueckert's "Klinischen Anweisungen," seem to me, for many reasons, to require further confirmation from various points of view.

In the baldness of young people I have obtained equally good effects from *Baryta* as from *Lycop.;* however, I regard the last-named remedy as the most efficient. [*Arsen.* is an excellent remedy for baldness, if the hair falls out in consequence of an impoverished condition of the follicles; the scalp and the skin generally are dry, and the patient's assimilative powers are impaired. H.]

## CHAPTER IV.

## OPHTHALMIC AFFECTIONS.

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### 1. Simple Ophthalmia.

In all these affections, whether only the lids are involved, or the eyeball itself, or the conjunctiva, my first and chief remedy always is *Acon.*, which, when given at the outset, has never disappointed me altogether, no matter how the parts might have been affected by the inflammation. Only when the sclerotica or cornea is inflamed, other remedies will have to be resorted to which I shall mention by and by. If Acon. does not improve the case, I then resort:

1. In simple inflammation of the lids, with great photophobia and a profuse secretion of mucus, immediately to *Sulph.*, or, if the lids are spasmodically closed, and even bleed when opened forcibly, to *Bell.* If the lids are inflamed as if erysipelas had invaded them, I know of no better remedy than *Hepar*, and if they are everted, and *Sulph.* does not help, I give *Merc.* more especially if the patient is unable to bear the glare of the fire, and the meibomian glands are ulcerated and scurfy. Beside these remedies *Puls.* and *Sulph.* have always proved exceedingly efficient in my hands for chronic ulceration, and, if these remedies do not help, *Euph.* and sometimes *Sepia*, the former more especially if such patients are constantly disposed to wink. *Hepar* has often proved efficient, especially after *Merc.* and *Bell.*, more particularly if the eyes felt sore and bruised, the corners of the eyes were likewise invaded, and the suppuration of the meibomian glands, and the consequent nocturnal agglutination of the eyes neither yielded to *Euph.* nor *Puls.* In another case *Ant. cr.* removed a chronic inflammation and soreness of the outer canthi, almost as by a miracle. *Rhus tox.* is not unfrequently suitable, especially if the eyelids can only be opened with difficulty, and if every attempt to open them causes torrents of acrid and excoriating tears to run down the

cheeks, or a yellow purulent mucus is discharged. The effect of *Arsen.*, if only the internal surface of the lids is inflamed, with spasmodic closing of the eyes, exceeds all belief, no matter what may be the character of the pain attending this condition; *Arsen.* likewise has a wonderful effect, if *Euph.* does not remove the ophthalmia accompanying a severe coryza, and the eyelids continue to burn and sting, with discharge of acrid and excoriating tears. If such an inflammation of the lids occur among new-born children, other remedies will undoubtedly have to be used, of which we shall speak by and by.

2. **In Conjunctivitis.**—Here too *Arsen.* is one of the most important remedies, especially if the conjunctiva has a bluish-red appearance, with reticulated bundles of vessels, is granular and protrudes between the lids like a puffy swelling. Next to *Arsen.* we have *Bell.* and *Sulph.*, if the inflamed and red conjunctiva is interstitially distended, *Sulph.* being particularly indicated if the conjunctiva hangs down like a bag. If there is no other alteration than simple engorgement of vessels, *Puls.* and *Merc.* frequently remedy this disorder.

3. Inflammation of the **Sclerotica.**—Here the main remedy is *Merc.*, after which, if the sclerotica continues to exhibit a blood-red appearance, looks puffed and even ulcerated, *Sulph.* may be given in most cases with the best results; this remedy almost always removes the last remnant of the inflammation.

4. Inflammation of the **Cornea.**—The remedies that have proved the most efficient for this inflammation in my hands, are: *Hep.*, *Arsen.*, *Calc.* and *Sulph.*, even if ulceration had already set in, although in such a case *Arsen.* and *Calc.*, and even *Euph.* do more than *Hep.* and *Sulph.*, so that I have lately been in the habit of beginning the treatment with *Arsen.*, and sometimes complete a cure with this remedy alone.

5. Inflammation of the **whole eye.**—Here the chief remedy always is *Acon.* 30th, of which I give every three hours a teaspoonful of a solution of three globules in half a tumbler of water, until the violence of the inflammation is subdued. If, after this, symptoms remain that will not yield to *Acon.*, I have recourse to *Sulph.*,

generally with the best result; or to *Arsen.*, if the patient complains of a good deal of tearing and stitching distress, and photophobia; or *Puls.*, if there is a good deal of lachrymation in the open air, with secretion of a quantity of mucus and dimsightedness obliging the patient to wipe his eyes all the time, for which *Crocus* is likewise appropriate; likewise *Merc.*, if the lids seem to be glued to the eyeballs, with pain under the lids as from a cutting body, and great dread of candle or day-light.

6. **Ophthalmia of new-born infants.**—Here too *Acon.* is the sovereign remedy provided it can be applied at once; it sometimes mitigates the inflammation in a few hours so that the remainder easily yields to *Merc.* or *Dulc.* But if the disease has progressed considerably, no remedy will be found capable of accomplishing more good than *Sulph.*, which is in some cases succeeded with a good deal of effect by *Calc.* If *Sulph.* proves ineffectual, *Rhus t.* helps sometimes, especially if, on pulling the lids apart, the conjunctiva protrudes between them, like a dark-red, puffy swelling; likewise *Lycop.* or *Nitr. ac.*, if *Calc.* had improved, but not cured the case. If the children are unwilling to open the eyes, and if, on the lids being pulled apart, the cornea looks obscured and dim, there is no better remedy than *Euph.* [In purulent ophthalmia of new-born infants it is absolutely necessary to apply, by means of a fine camel's hair pencil, a feeble solution of Nitrate of Silver, say one grain to an ounce of distilled water, to the inflamed eye; I am in the habit of repeating the application every three or four hours until the suppuration has entirely ceased and the inflammation is considerably moderated. H.]

7. **Chronic Ophthalmia.**—If the remedies indicated in Nos. 1 to 5 are not sufficient, more particularly *Sulph.* and *Euph.*, *Calc.* sometimes proves very efficient, especially if ulcers or pellicles on the cornea have formed and a good deal of burning and cutting is experienced in the eyes, when reading by candle-light, in the evening; likewise *Arsen.*, if a good deal of pain is experienced around the eye-ball, with sensation as if it would be torn out; or *Sepia*, if there is much photophobia.

## 2. Specific Forms of Ophthalmia.

1. **Catarrhal** Ophthalmia.—Beside *Euph.* which is here almost specific, if the patient is at the same time afflicted with profuse coryza, *Puls.*, *Arsen.* and *Hep.* likewise prove excellent remedies. If there is profuse lachrymation, with evening exacerbation of the pains, nocturnal agglutination and dimness of sight as from dust having got into the eye, or as if the patient were looking through gauze, *Puls.* almost always helps; likewise *Arsen.* if the tears that run out of the eye, are burning-hot. If the eyes look as if suffused with blood, *Nux v.* or *Bell.* helps, the latter especially if the whites look quite red and the spasmodic pains penetrate to the interior of the eye; *Nux vom.*, if the corners are especially reddened and the eyes are very sensitive to light. If the cheeks are excoriated by the tears and a corrosive coryza at the same time runs out at the nose, *Merc.* or *Arsen.* will cure the trouble.

2. **Rheumatic** Ophthalmia.—Here too *Acon.* is the first remedy to be used, after which *Puls.* renders excellent service in many cases, especially if the stinging-tearing pains exacerbate in the evening. If *Puls.* is not sufficient, *Merc.* often completes the cure, more particularly if the pains are very violent in the night. *Bry.* and *Rhus tox.* are likewise appropriate in some cases, likewise *Spigel.*, if a bluish-red circle is seen around the cornea. In chronic cases *Sulph.* will always be found the best remedy, likewise *Euph.*, if phlyctæna start up around the cornea. In a case where the trouble arose from bathing the perspiring head in cold water, *Acon.* and *Rhus* proved more useful than *Bry.* If the tearing pains deprive one of sleep at night, *Verat. alb.* helps sometimes, especially if the weather is cold and damp.

3. **Arthritic** Ophthalmia.—Here too *Acon.* is the main remedy which, if it does not altogether remove, yet moderates the raging pains in a few hours so that *Bell.* or *Sulph.* removes the remainder. Altogether *Sulph.* is one of the most comprehensive remedies in this form of ophthalmia, even if the cornea is considerably involved in the inflammatory process; only, if the patient complains at the same time of violent headache, I first give *Bell.* until the headache moderates. For severe, drawing-tearing pains in one side of the

head as far as the nose, *Coloc.* helps sometimes; likewise *Coccul.*, if the eye looks smaller as if pushed back into the socket; *Spig.* on the contrary, if the eye seems too large for its cavity, and a pain is experienced as if the eyeball would be pressed out. *Lycop.*, which I regard as one of the most important anti-arthritic remedies, has rendered important services in some of these cases that I have had to treat; likewise *Calc.* in inveterate cases of disorganizations of the cornea.

4. **Scrofulous** Ophthalmia.—If the patients have not yet been treated with excessive quantities of Mercury, I always commence the treatment with *Mercurius*, especially if the pains are cutting and the patients complain of great photophobia and exacerbation of the symptoms in bed. If Mercury had already been used, I begin the treatment with *Hepar*, after which I give *Bell.*, if the pains are of a pressive or aching kind, and the eyes are very much injected; or else I give *Puls.*, if the eyelids are glued together and the eyes discharge acrid tears. Next my ordinary rule is to give *Sulph.* and then *Calc.*, allowing each remedy to act a long time, and if there yet remains ophthalmia that will not yield to *Calc.*, I give *Nitr. ac.* By pursuing this course I have cured a great many cases of scrofulous ophthalmia, even if ulcers and pellicles on the cornea were present.

5. **Gonorrhœal** Ophthalmia.—In all such cases I first give *Acon.*, with a view of moderating the inflammation, after which, if the discharge still continues, *Nitr. ac.* completes the cure, or perhaps *Puls.* if the discharge had suddenly stopped. As regards *China*, with which Rosenberg professes to have cured a case (see All. hom. Zeit. 35), I have never seen the least effect from it; it is therefore my opinion that the ophthalmia spoken of in that passage, originated in some other cause than the contact with gonorrhœal matter.

### 3. A few General Indications.

1. According to the **condition** of the parts: The lids are **shining-red**: *Acon., Hep.;* **everted**: *Merc., Bell., Hep.;* spasmodically **closed**: *Hyosc., Bell., Rhus tox., Arsen.;* inflamed on the **inner** surface: *Ars., Rhus, Bell.;* **ulcerated** margins: *Merc.;* nocturnal **agglutination,** with secretion of a quantity of purulent mucus: *Euph., Puls., Hep.,*

*Nux v.*, *Calc.*, *Acon.*, *Sulph.;* **blennorrhœa** of the **conjunctiva**; *Euphr.*, *Puls.*, *Hep.*, *Rhus tox.*, *Lyc.;* great **dryness** of the lids: *Verat. alb.;* **bluish redness** of the conjunctiva: *Ars.;* **puffy**, interstitially distended: *Bell.*, *Rhus t.*, *Sulph.*, *Arsen.*, *Acon.;* hanging down **like a bag**: *Sulph.;* **granular**: *Ars.;* very much **injected**: *Ars.*, *Euphr.;* sclerotica **interstitially distended**: *Merc.*, *Sulph.;* **injected**: *Bell.*, *Arsen.*, *Euphr.;* **Vesicles** and pimples on the sclerotica: *Merc.*, *Sulph.*, *Euphr.;* **pimples** around the eye: *Merc.*, *Hep.;* **ulcers** on the cornea: *Euphr.*, *Ars.*, *Sulph.*, *Calc.*, *Hep.;* **dimness** of the cornea: *Euphr.*, *Sulph.*, *Calc.*, *Rhus t.*, *Merc.*, *Bell.;* **spots** on the cornea: *Euph.;* **fungoid growths** in the eye: *Arsen.*, *Lyc.;* **pus** between the lamellæ: *Arsen.*, *Hep.*, *Merc.*

2. According to the **sensations**: **photophobia**, *Acon.*, *Bell.*, *Sulph.*, *Merc.*, *Hep.*, *Calc.*, *Nux v.*, especially in the evening, at candle-light, *Merc.*, *Calc.;* when exposed to the **blaze** of a fire, *Merc.;* has to **blink**, *Euphr.*, *Crocus;* **burning** pains, *Ars.*, *Hep.*, *Calc.*, *Bell.;* as if **sore** and **bruised**, *Hep.;* as if the eye were too large, would be **pushed** or **torn** out, *Spig.*, *Arsen.;* as if too **small** and pressed back into the socket, *Cocc.;* **tingling** on the inner surface of the lid, especially in the evening, *China;* **cutting** and stinging, *Merc.*, *Calc.;* pains **around** the eye, *Bell. Hep.*, *Ars.;* Accompanied by violent tearing, drawing **headache**, *Bell.*, *Euphr.*, *Coloc.*, *Cocc.*, *Spig.*, *Verat. alb.;* **dimness** of sight, obliging him to **wipe** his eyes, *Puls.*, *Croc.;* **flashes** of light and sparks before the eyes, *Bell.*

3. **Pressure** when *separating* the lids, *Bell. Bry.;* **cutting** when straining the eyes, *Merc.;* **worse** in the evening, *Puls.*, *Calc.*, *China;* in the **night**, *Merc.*, *Verat. alb.;* worse early **in the morning**, *Nux vom.*

4. Profuse **lachrymation**, *Euphr.*, *Puls.*, *Acon.*, *Ars.*, *Bell.*, *Hep.*, *Merc.*, *Sulph.*, *Sep.;* **acrid** smarting, *Ars.*, *Puls.*, *Euphr.;* **Bleeding** when separating the lids, *Bell.*, *Nux vom.*

5. **Styes.**—Here my main remedy always is *Puls.*, and if this is not sufficient to prevent their return, I give *Sepia*, or, according as the patient may be otherwise affected, *Silic.* The thick, hard **tubercles** in the lids are undoubtedly cured by *Staph.* or *Thuja.*

## Ophthalmic Affections of Various Kinds.

1. **Hypopion** (purulent eye).—What *Arsen.*, *Hep.*, *Merc.* and *Sulph.* are capable of accomplishing if pus exudes between the lamellæ of the cornea, is well known. The worst case I have met with, is the case of a boy of ten years, on whose right eye, when he first came to me, not a trace of the pupil was perceptible; on the left eye a trace of it was still seen in the shape of a narrow, black streak. The circumstance that this whole affection had developed itself after the suppression of a purulent scald-head, decided me to give at once *Arsen.* 30th, two globules; already at that period I had had opportunities of witnessing many fine results from the use of *Arsen.* in suppressed exanthems and ulcers. I ordered two doses dry on the tongue, the second dose to be taken two days after the first, and directed the boy to return in a week. The change that took place during this time, exceeds imagination. The left eye was almost entirely clear, and on the right the pupil, which had entirely disappeared, was again distinctly seen. I gave another dose of *Arsen.* 30th, two globules, and in another eight days both eyes were perfectly clear; the tinea had re-appeared so profusely that the whole head was covered with it. The tinea was cured by means of *Rhus tox.* and *Sulph.*, without any return of the hypopion.

2. **Sanguineous Effusions** in the eye.—Here *Bell.* and *Nux vom.* have done everything in my hands that can possibly be desired; only in one case I have had to use *Cham.*

3. **Lippitudo,** chronic lachrymation without fistula.—For this affection *Euph.* has proved the most efficient remedy; where it did not help, *Sulph.*, *Calc.*, *Sep.*, and sometimes *Acon.* and *Bell.*

4. **Fistula Lachrymalis.**—I have not yet treated a single case, where *Sulph.* did not render eminent service; in many cases this remedy alone effected a cure. If *Sulph.* was not sufficient, I have generally accomplished my purpose by giving *Calc.* alone or a dose of *Lyc.* after *Calc.* I have never seen any great results from *Stann.* and *Natr. mur.*, in this affection. [*Silicea* is admirable in this trouble; I have cured fistula lachrymalis with *Sil.*, *Puls.*

and *Acon.;* a fine cure with *Sil.* is reported in the British Journal of Homœopathy. H.]

5. **Spasmodic Closing** of the lids.—If there is no inflammation, I know of no better remedy for it than *Hyosc.;* if this is not sufficient, *Bell.* or *Sepia* [also *Gelseminum.* H.].

6. **Affections of the Cornea.**—For spots on the cornea and dimness of this membrane my first and chief remedy always is *Euph.;* if insufficient, I give afterwards *Sulph.*, *Calc.* and *Nitr. ac.* at long intervals, and generally accomplish my purpose by pursuing such a course. For **thickening** of the cornea, I give at once *Calc.* with the best results; I have likewise observed good effects from *Cann.*, although, in order to complete the cure, I had again to resort to *Calc.*. and afterwards to *Nitr. ac.*

7. **Staphyloma of the Cornea.**—In former times I have often wasted a good deal of time and effort upon this disorganization which it is often impossible to remove by a process of retrograde metamorphosis; in recent cases, where the disorganization had not progressed too far, I have sometimes witnessed good results from *Calc.*, *Lyc.*, *Sulph.* and *Nitr. ac.*, until a case came to me for treatment where the eye had been irremediably lost for upwards of eight years, and where I determined to try what internal treatment could do for the ugly-looking conical tumor somewhat larger than a hemp-seed which occupied the place of the former pupil and by which the patient was prevented from using an artificial eye. *Calc.*, *Sulph.*, *Nitr. ac.* and *Lyc.* proved utterly inefficient, until I gave *Apis*, after which, in less than a week, the tumor began to diminish in size until about the eighth week, when the improvement remained stationary. I now had again recourse to *Lyc.*, which gave the decrease of the tumor another start without, however, removing it entirely, until I gave another dose of *Apis*, which completely removed the rest of the tumor and at least imparted a more normal shape to an eye that had been deemed lost for years beyond the remotest chance of recovery.

8. **Cataract.**—In this disorganization, of whatever kind, I have so far accomplished most with *Sulph.*, allowing the dose to act a long time. If the action of *Sulph.* seems exhausted, I then

commonly resort to *Calc.* and next to *Lyc.* with tolerable success; if these remedies do not help, I have given with more or less success *Magnes.*, *Cannab.* and *Silic.*, and, in the case of old people, *Conium* 30th, of which I cause a solution of six globules to be at the same time applied externally. In the case of an infant that was born with cataract, *Sulph.* effected considerable improvement; a cure was finally completed by means of *Euph.* and *Lyc.* which is recommended by Rummel.

9. **Glaucoma.**—*Phosph.* is the surest remedy for this disorder, and helps more frequently than any other remedy; if a cure is not completed by *Phosph.*, *Lyc.* and no less *Silic.* will be found indispensable.

10. Disposition to **Squint.**—For this defect I give children with the best result *Hyosc.* or *Bell.* in the first place, and if these remedies do not help, *Alumin.*

## 5. Defects of Vision.

1. **Amblyopia,** weakness of the optic nerve, retina.—If the eyes had been weakened by **excessive use,** straining them, I have likewise found *Ruta* one of the most excellent remedies, although *Bell.* and *Euphr.* have likewise proved very efficient in my hands in similar circumstances, provided these remedies were indicated by the external appearance of the eyes. In the case of inveterate drunkards I have found *China* a very excellent and reliable remedy; *Sulph.* and *Bell.* seemed to be equally efficient. Besides these remedies the following have been found very efficient: for **dimness of sight** as if seeing through gauze, *Calc.*, *Lyc.*, *Natr. mur.*, *Sep.*; for **dark** points and gauzy appearances before the eyes: *Caust.*, *Sep.*, *Phosph.*, *Silic.*; for frequent attacks of **obscuration of vision,** *Calc.*, *Lyc.*, *Natr mur.*, *Sep.*, *Silic.*; for a sensation as if a **gray** or **black** covering were hanging before the eyes, *Phosph.*, *Silic.*; if the letters **run into each other** when one is writing, *Drosera*, *Natr. mur.*, *Silic.*; for **sparks,** luminous and fiery appearances before the eyes, *Calc.*, *Natr. mur.*, *Sep.*, *Silic.*; for attacks of **sudden blindness,** *Silic.*, *Phosph.*

2. For **Hemeralopia,** from dusk, most frequently *Bell.*, next to which also *Verat. alb.;* for **Nyctalopia,** when the patients only see at night, principally, *Silic.*, after which likewise *Phosph.*, and *Sulph.*

3. For **Diplopia:** *Bell.*, *Cicuta*, *Dros.* For vertical **half-sightedness:** *Lyc.*, *Caust.* For **horizontal** half-sightedness: *Aurum.*

4. For **near-sightedness:** If the symptoms otherwise corresponded, I have more than once improved the case, especially if the patients were young, and after exhausting diseases, by means of: *Carb. veg.*, *Phosph.*, *Phosph. ac.*, *China*, *Amm. carb.*, *Petrol.* For **far-sightedness** I have given with much benefit: *Con.*, *Dros.*, *Sulph.*, *Calc.*, *Silic.* After **abuse of spirits,** *China*, *Calc.*, and *Sulph.* are much more efficient than the much-vaunted *Nux vom.*

5. For **photophobia** without ophthalmic inflammation, I know of no better remedies than *Acon.*, *Merc.* and *Bell.*, and if these do not help: *Sulph.*, *Ars.*, and *Phosph.* If the patients complain that it is very dark and that they want more light and cannot get enough of it (**photomania**), and *Acon.* does not improve the case, *Stram.*, *Silic.*, or *Sulph.* will often be found sufficient.

6. **Amaurosis.**—If this defect does not occur as a consequence of suppressed eruptions or cerebral concussions, but among persons of a certain age as a consequence of chronic weakness of sight, and the loss of sight is complete, it is my opinion that no art in the world will be found capable of even effecting a partial improvement. In such cases the blindness results either from complete atrophy of the optic nerve or from incipient partial ramollissement of the brain, or from similar pathological conditions, for which no remedy can do anything whatsoever. On the other hand, if the patients were still young, I have cured many cases of far-advanced impairment of vision, almost bordering on complete amaurosis, more particularly by *Merc.* and *Sulph.*, and next to these, more particularly by *China*, *Dros.*, *Aur.*, *Calc.*, *Silic.*, and *Phosph.*, but in no case by the exclusive use of one remedy; *Natr. mur.*, and *Sep.* have likewise proved very efficient in my hands in some cases of this kind; nor can I bestow sufficient praise upon Hahnemann's excellent observation of "contraction of the pupils" in amaurosis,

which I have found confirmed in corresponding cases occurring in my own practice. I have no experience to offer regarding the use of *Zinc.*, recommended by Hahnemann in similar circumstances. For amaurosis after suppressed tinea, *Sulph.* is undoubtedly one of the most excellent remedies, nor will *Sepia* be found less efficient if a violent headache has preceded the amaurosis.

## CHAPTER V.

## AFFECTIONS OF THE EARS.

### 1. Diseases of the Ears themselves.

1. **Inflammation of the outer ear,** otitis externa. If the concha alone is inflamed, or the external visible meatus, *Puls.* will certainly help, no matter how severe the pains may be, after which a dose of *Merc.* will seldom be required. If the inflammation penetrates to the interior of the ear, and the brain is likewise involved in the inflammatory process, *Bell.* will have to be resorted to as the most indispensable remedy.

2. Inflammation of the **inner** ear, otitis interna.—This inflammation, if affecting the drum, cannot sufficiently invite the physician's attention. Fortunately this inflammation is of rare occurrence, since it effects mostly only scrofulous subjects in consequence of a tedious morbid condition of the bony parts, but is on this account so much more dangerous, inasmuch as it never runs its course without suppuration and the patient would inevitably perish unless the pus should find means of escape. Sometimes it is true, if the threatening symptoms, such as severe deep-seated headache as if the skull were too small, spasms in the face, sudden deafness and roaring in the ears etc., are perceived and attended to in time, the discharge of the pus through the external meatus, or through the Eustachian tube and the pharynx can be facilitated by means of *Hep.*, *Laches.* or *Merc.;* but very often the parts are so completely closed by the swelling and inflammation that the pus cannot escape or else dries up and adheres to the sides of the cavity in the shape of crusts which, in their turn, stop up the passage; now, if we do not succeed in softening these crusts by warm watery vapors, the patient loses every chance of recovery and often perishes in less than 24 hours from pressure on the brain. So far I have only had three cases of this frightful form of otitis to treat among children of the poorer classes; in these three cases the pus after the inflam-

mation and swelling had been reduced, was fortunately discharged, in two of them through the Eustachian tube and in the third through the meatus; in this case the discharge suddenly stopped one morning and neither remedies nor warm vapors were capable of restoring it; next morning the child was a corpse. In inflammation of any other *internal part of the ear* I have always succeeded perfectly with *Bell.* and *Merc.*, and it is only in rare cases that I have had to use *Bry.* as an intercurrent remedy for a violent headache.

3. **Otalgia, Earache.**—For persons, especially women who are afflicted with rheumatism, the most reliable remedy is always *Puls.*, especially if the pains dart through the whole face, and the patient complains of a pressing sensation in the ear from within outwards. If the ear is at the same time moist, with stitches deep in the ear and burning of the outer parts, *Merc.* helps, especially if a perspiration sets in which affords no relief. Aid is likewise often afforded by *Arnica*, if the patient complains of long stitches and jerks in the ear, together with great sensitiveness to loud sounds; *Bell.*, if the stitches and tearing pains penetrate to the fauces, with boring in the ears, and involving the head and eyes; *Plat.* for crampy pains, formication, numbness, and a feeling of coldness in the ears; *Cham.*, if the pain arises from suppression of the perspiration, with lancinating stitches in the ears and a tearing distress down to the lobules. If neither of these remedies helps, *Sulph.* or *Calc.* sometimes renders excellent service, more particularly if the ear discharges more or less; I can moreover recommend: *Merc.* and *Sil.* for **boring** pains; *Sulph.*, *Calc.*, *Phosph.* for **throbbing** and beating pains; *Silic.* for **stitches** from within outwards; *Merc.*, *Puls.*, *Cham.*, for **tearing** pains; *Platina*, *Puls.*, *Merc.*, *Bell.* for **dragging** pains like tenesmus; *Cham.*, if the ears are at the same time **very dry**; *Arn.*, *Cham.*, in the case of sensitive individuals who think the pain is intolerable; *Merc.*, if the **inner ear** feels **cold** and the **outer ear burns**; *Bell.*, if the pains occur in **paroxysms** and are aggravated by motion or contact; *Puls.*, *Sulph.*, if the pains are worse **in the evening**; *Merc.*, *Dulc.*, if worse **at night**; *Nux vom.*, *Calc.*, if worse **in the morning**; *Cham.*, *Merc.*, *Dulc.*, if the pain originated **in a cold**, and *China*, if the patient complains of a **stinging** and ringing in the inner ear, and a tearing in the outer ear which moreover looks red.

4. **Otorrhœa, Discharges from the Ear.**—If a discharge of this kind remains after inflammation, it yields most commonly to *Puls.* or *Sulph.*, and if it appears after exanthems like scarlatina, measles, smallpox, etc., *Bell.*, *Hep.*, *Merc.* prove the most suitable remedies; also sometimes *Puls.*, especially after measles. In the case of **chronic** otorrhœa, *Bell.* or *Merc.* may help sometimes, but the most reliable and most permanently curative remedies will always be: *Sulph.*, *Calc.*, *Lyc.* and *Sil.*, which are to be given at long intervals. If there are **scurfs** behind the ears with the discharge, no remedy has generally a better effect than *Graph.;* if the discharge has a foul odor, *Merc.* is most commonly sufficient, or sometimes *Caust.*, if *Sulph.* and *Calc.* prove unsuccessful.

5. For an abnormal **accumulation** of ear-wax, *Conium* undoubtedly occupies the first rank; for deficiency of ear-wax, we depend upon *Calc.* or *Carbo veg.;* the latter is, together with *Caust.*, an excellent remedy for **badly-smelling** cerumen.

## 2. Defects of the Sense of Hearing.

1. **Noises in the Ear.**—If the affection was caused by rush of blood to the head, I have derived the most success from *Arn.*, *Nux vom.*, *Bell.* and *Phosph.*, and if complicated with *rheumatic* affections, from *Merc.*, *Puls.*, *Cham.* and *Caust.;* in the case of **nervous** individuals from *Acon.*, *Coff.*, *Carbo veg.* and *Sulph.* If accompanied by great **sensitiveness** to sound, from: *Arn.*, *Sulph.*, *Acon.*, *Lyc.;* if by fine **ringing,** especially in the case of debilitated individuals, from *China*, and if by a more deep-sounding **buzzing,** from *Caust.* and *Carbo veg.*, and if every little noise reverberates in the ear, from *Graph.*

2. **Hardness of Hearing.**—If attended with otorrhœa, and *Merc.* and *Puls.* do not cure the case, *Sulph.*, *Calc.*, *Lyc.* and *Caust.* have most generally proved the most efficient remedies in my hands. If accompanying or succeeding a **catarrh,** and *Puls.*, *Merc.* or *Cham.* do not help, *Calc.*, *Arsen.*, or even *Carbo veg.* sometimes prove of great use, nor any less *Graph.,* if the eustachian tube is affected by the catarrh. If it is occasioned by acute exanthems, the best remedies after **measles** commonly are: *Puls.*, *Carbo veg.* or *Merc.;* after **scarlatina,** *Bell.*, *Lyc.*, *Nitr. ac.*, *Hep.;* and after **variola,** *Sulph.;* for **rheumatic** hardness of hearing, *Sulph.*, some-

times also *Dulc.* or *Bry.* and likewise *Caust.;* for **congestive** hardness of hearing, *Bell., Sulph., Sil.,* also *Nux v.,* the last mentioned especially after suppression of piles; for **nervous** hardness of hearing, especially after typhus, *Arn., Phosph., Petrol.;* after **suppression** of ulcers or discharges, *Arsen., Sulph., Caust., Ant. cr.;* with **hypertrophy** of the **tonsils,** *Merc., Nitr. ac., Staphys.;* for difficulty of **understanding human speech,** *Phosph.;* if the ears feel *as if stopped, Puls., Silic., Merc., Conium;* and if they sometimes open **with a report,** and the hardness of hearing is especially worse at **full-moon,** *Silic.* If the ears are too **dry,** with deficiency of ear-wax, *Carbo veg.* or *Calc.* sometimes helps.

### 3. Phenomena around the Ears and in their neighborhood.

1. **Eruptions.**—If the parts behind the ears are **damp** or very moist, the best remedies are *Calc.* and *Graph.,* or, if all the other symptoms correspond, *Oleand.* and *Petrol.* for **scurfs** behind and on the ears, likewise *Graph.,* also *Hepar* and *Lyc.,* and sometimes, *Sulph., Baryt.* and *Oleand.*

2. **Parotitis, Mumps.**—If I am called at the outset, and the disease is not *symptomatic,* the swelling looks pale and there is no fever, I always commence the treatment with *Merc.* 30th, and in most cases complete it with this remedy alone, dissolving two globules in half a goblet of water, a teaspoonful every three hours. If the swelling looks more or less red, I commence the treatment, and generally achieve the cure with *Bell.,* and if the inflammation has an erysipelatous character, I sometimes resort to *Rhus t.* with the best result, or if a metastasis to the brain takes place, I give *Bell.* or *Bry.* If the swelling is not dispersed but grows harder, *Carbo veg.* almost always helps; if not, *Cocc.* If suppuration threatens, I give *Calc.,* or likewise, *Kali carb.,* especially if the *right* parotid gland is the seat of the trouble, with exacerbation of the symptoms before midnight. If suppuration has already set in, with or without gangrene, I give *Arsen.,* sometimes *Rhus t.,* or even *Phosph.* or *Silic.* If hectic fever supervenes, *Carbo veg.* or *Cocc.* If the swelling develops itself after scarlatina, my chief remedies are *Ars.* and *Rhus t.,* likewise *Baryt., Calc., Kali,* and *Lyc.* If the swelling occurs after fever and ague, *Arsen.* is undoubtedly one of the best remedies, and if it sets in after suppres-

sion of scald head, *Rhus t.* or *Arsen.* generally proves the best remedy. In the case of scrofulous individuals, if *Merc.*, *Rhus t.* and *Carbo veg.* remain without effect, and other glands are swollen at the same time, *Baryt.*, *Calc.* and *Sulph.* most commonly are the most efficient remedies, or even *Dulc.* and *Bell.* If the affection affects the stomach, *Carbo veg.* undoubtedly is preferable to any other remedy, likewise *Lyc.*; if the uterus is affected, *Bell.* or *Sepia*, and if the testicles, *Ars.* Schelling's observation in Rueckert, Vol. IV. pages 364, 5, regarding an emphysematous swelling of the neck, really does not come in the category of diseases of the parotids; for in such a case the swelling of the parotid gland is something purely accidental; I have seen this same disease start from the forehead, the nape of the neck, the sides or anterior surface of the neck, either remaining confined to these parts or else spreading thence further on to the chest, face and abdomen; in all such cases *Carbo veg.* proved very efficient, and if the patient experienced a good deal of anxiety, *Arsen.*

## CHAPTER VI.

## AFFECTIONS OF THE NOSE AND CATARRH.

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1. **External** Nose.—For a **swelling** and redness of the outer nose, not originating in catarrh, *Hep.* or *Aurum* generally proves sufficient, likewise *Phosph.*, if the swelling shines and the nasal cavities are very dry. If the swelling is complicated with **erysipelas** of the nose, *Rhus t.* or *Bell.* is the best remedy. Redness of the tip of the nose, as in the case of drunkards, often yields indeed to *Rhus t.* and *Ruta*, but still more frequently to *Calc.*, especially in the case of scrofulous subjects. **Scrofulous** swellings of the nose require moreover in most cases: *Calc.*, *Aur.*, *Caust.*, although *Bell.* and *Hep.* likewise prove very efficient in such cases; for **syphilitic** swellings *Merc.* and *Nitr. ac.* occupy the first rank, and for **mercurial** swellings, *Aur.* and *Hep.* If the swelling of the outer nose ulcerates and becomes scurfy, and *Calc.* does not help, *Caust.* often proves very useful, and sometimes *Carbo an.;* if the borders of the nostrils are sore and swollen, *Bell.*, *Merc.* and *Hepar* almost always relieve this trouble.

2. The **inner** nose.—For the scabs, ulcers, and scurfs which here form, *Puls.*, *Cham.* and *Hep.* accomplish everything that can be desired, if those sores originate in accidental causes; whereas *Phosph.* and *Aur.* or even *Thuja* may prove more efficient in chronic cases. An ulcerated inflammation of the Schneiderian membrane with purulent discharge (ozæna narium), if the patient had been previously suffering a good deal from chronic catarrh, and hence the affection is of a purely catarrhal origin, is almost always relieved by *Puls.* or *Sepia;* if the discharge occurs in scrofulous individuals, with or without crusts in the nose, *Calc.*, *Rhus t.*, *Hepar*, and no less *Aurum*, or even *Sulph.* and *Silic.* are indispensable remedies [likewise *Kali bichr.* H.] If there is a good deal of fœtor from the nose, *Calc.* or *Nitr. ac.*, and sometimes *Phosph.* or *Graph.* relieve

this infirmity. If the patient had had syphilis and had taken a good deal of Mercury, *Aurum* then helps in most cases, and sometimes *Nitr. ac.* in a most astonishing manner; but in such cases *Aurum* will have to be given in the second trituration, whereas the 30th attenuation of *Nitr. ac.* will often suffice.

3. **Nasal Polypi.**—Beside *Calc.*, *Sanguin.* is the only remedy that has so far proved very efficient in my hands for mucous excrescences of this kind, whereas I have never seen any marked effects from the much-vaunted *Teucrium*, except in one case where the patient, a lady, had been afflicted for years with a chronic catarrh. For *fibrous polypi*, *Calc.* likewise sometimes proves a very efficient remedy, especially if a few doses of *Sulph.* are given first and allowed to act for a considerable period of time; although, as a rule, I prefer *Phosph.* for these polypi, especially if they bleed readily.

4. **Hæmorrhage from the nose, nose-bleed, epistaxis.**—In the case of plethoric young people I always first resort to *Acon.*, generally with the best result; in the case of young girls whose menses had become suppressed, I give *Bry.*, or *Puls.* [also *Hamam.* H.] If these remedies do not help, and the patient complains of a good deal of vertigo, obscuration of sight or buzzing in the ears, I generally resort to *Bell.* or *Nux vom.* If the face is very pale, the following remedies help beside *Bell.*: *China*, *Carbo veg.* and *Verat. alb.*; the last-named remedy is more especially indispensable, if fainting fits and a general coldness of the extremities supervene, and *China* does not relieve this condition. If the bleeding is preceded by a good deal of tingling in the nose, and *Bell.* affords no relief, *Arn.* or *Rhus t.* often helps; *Cina* sometimes arrests the bleeding in the case of children who are affected with worms. In violent hæmorrhages that cannot be arrested by any remedy, *Croc.*, *China*, *Carbo veg.* and *Sep.* often help (also *Hamam. virg.* H.) If the epistaxis occurs among debilitated individuals: *Carbo veg.*, *Secale* and *Verat. alb.* often prove very useful beside *China*. If the bleeding is excited again by the least stimulating or heating cause, such as wine or any other cause, *Acon.* is the first most efficient remedy in such a case, after which very often *Bry.* or *Nux vom.*; if the bleeding sets in more particularly in the evening: *Puls.*; if at night, beside *Merc.* or *Arsen.*, sometimes *Bry.*, or *Rhus t.*,

and if it occurs more particularly **early in the morning**, beside *Nux vom.*, sometimes also *Bry.;* when occurring after a **blow** or **fall** on the nose: *Arn.* or *Sep.;* after **stooping** or other exertions: *Rhus t.* and *Carbo veg.* Upon the whole I pay very little attention to the color and quality of the blood, for the reason that, if the drug was otherwise indicated by the symptoms, I have obtained equally favorable results, let the quality of the blood be what it might. If all the other symptoms correspond, I of course prefer *Arn.* and *Bell.*, if the blood is **bright-red** and fluid; *Crocus*, if it is **dark**, and beside *Croc.*, I prefer *Merc.*, if the blood coagulates readily.

5. **Catarrh, Coryza.**—For a violent profuse coryza, with copious, watery discharge from the nose, irritation of the eyes and a copious flow of tears, I always give *Euph.* with the best result; if the discharge is less copious and consisting of drops of a watery or purulent mucus, I give *Merc.;* if it is acrid and excoriating, and *Merc* is of no avail, I give *Ars.*, which is likewise excellent if the nose is obstructed in spite of the copious discharge. If the nose remains obstinately dry, and the forehead feels dull and stupefied, or severe tearing pains are sometimes felt in the frontal cavities, no remedy is better suited than *Nux v.*, and if this does not help, *Bryon.* If the nose is obstructed in the day-time, and only runs in the evening, *Nux vom.* is likewise suitable; *Puls.* is appropriate if, after the mucus begins to assume a thicker consistence, the nose is alternately stopped and running; this remedy is scarcely ever indicated as long as the discharge is watery, but is very often better adapted to the case than any other medicine, if the nose continues to discharge for an undue length of time a thick, yellow or green mucus, and likewise if the nose is only obstructed in the evening and in the room, and runs again in the open air. If the mucus has a very unpleasant odor, *Merc.* will sometimes be found appropriate. If only one side of the nose is obstructed, and every breath of cold air causes headache, which is moreover aggravated by motion, *Hep.* will afford relief. *Bell.* is very frequently suitable, especially after *Merc.*, in cases of ordinary fluent coryza, if it returns from exposure to the least cold current of air and *Hepar* proves insufficient; in the same manner *Ipecac.* will sometimes help, where *Nux v.* or *Arsen.* seemed indicated, but does not help. Moreover, if the borders of the nose are swollen, red and sore, a good deal of relief is likewise experienced from

*Cham.*, *Merc.*, *Bellad.* and *Hepar;* if the smell is lost, from *Puls.*, and sometimes from *Ipecac.;* or even from *Cyclam.*, if the patient has to sneeze a good deal; if the coryza is complicated with nose-bleed, from *Puls.*, *Arsen.*, *Bell.;* if the patient complains of a good deal of frontal headache, from *Bell.*, *Bry.*, *Ignat.*, *Nux vom.;* if the coryza is attended with more or less fever, *Cham.* will be found useful, particularly in the case of children, more especially if one cheek is red, and they feel very thirsty and chilly; if the patients complain of a good deal of pain in the limbs, *Merc.* is the remedy; and if, with heat in the head and face, the patient complains of creeping chills even when seated by a warm stove, *Nux vom.* If the discharge had been suddenly suppressed or arrested in its course, and a maddening headache is the result, with furious delirium and fever, *Acon.* affords relief more frequently than most other remedies; if it is not entirely sufficient, *Bell.* or *Bry.* may be given; or *China* and *Puls.*, if the pains are not so much inflammatory, but rather external and tearing. If the suppression of catarrh is succeeded by asthmatic dyspnœa, *Ipecac.* generally helps very speedily, and if it should not, *Ars.* For chronic catarrh the most reliable remedies are: *Sulph.*, *Calc.* and *Silic.*, or even *Cyclamen*, the last-named remedy if the patient sneezes a good deal and complains of rheumatic pains in the head and ears. I had a fine illustration of the curative powers of *Cyclamen* in such cases with my colleague, Malaise, in Liege; the patient was a lady of upwards of 60 years old, and had been suffering with catarrh for years; it disappeared in less than 24 hours to the astonishment of every body.

# CHAPTER VII.

## FACE AND LIPS.

### 1. Prosopalgia, Neuralgia of the Face.

If a beginner reads over the various remedies that have so far been used or recommended for neuralgia of the face, and is still inexperienced in the treatment of these affections, he might find it very difficult to at once hit upon the right remedy. This business, however, is very much facilitated by adopting for neuralgia of the face the same course that we have pursued in regard to headache, namely to classify this disease in accordance with special distinct causes and to adopt at the very commencement of our inquiries 1, *congestive*, 2, *rheumatic*, and 3, *nervous* prosopalgia.

1. **Congestive.**—Here *Bell.*, *Nux vom.*, and *Laches.* are the most efficient; likewise *Arn.*, *Bry.* and *Phosph.;* if there is a good deal of throbbing in the cheek, *Arn.;* if the patient complains of pressure which is relieved by pressing on the cheek, *Bry.;* if the pain is of a tearing character, particularly under the left eye, *Laches.;* if vertigo and headache are at the same time complained of, *Phosph.*, *Nux vom.* or *Bell.*

2. **Rheumatic.**—*Acon.* often affords speedy relief, especially if the cheeks are flushed and hot; *Cham.*, if the pains exacerbate at night and drive one to despair, with redness of one cheek and paleness of the other. One of the most efficient remedies is *Caust.*, especially if the violent nocturnal tearing is felt in the whole of the right side of the face; *Coloc.*, if this tearing distress is chiefly felt in the left side and the pains are chiefly aggravated by contact. Next to this remedy we have *Puls.*, especially if the eyes weep a good deal, and a quantity of mucus is secreted from the nostril of the affected side. If the attacks return every day at the same hour, like typical paroxysms, and appear more particularly after a cold,

in damp weather, *Spig.* will prove one of the most efficient remedies. If the pain is made worse by talking, eating and swallowing, or in general whenever the mouth is opened, and if the jaws and gums are at the same time invaded, *Phosph.* helps, more especially if great determination of blood to the head is present. Finally *Verat. alb.* may be resorted to if the drawing-tearing pains, accompanied by heat and redness, extend over the cheeks, temples and eyes, and almost drive the sufferer to madness.

3. **Neuralgia** of the face proper (facial neuralgia). The main remedies for this affection are: *Bell.*, *Nux vom.*, *Plat.*, *China*, *Cham.*, and *Hyosc.*, likewise *Caps.*, *Mezer.*, *Phosph.* and *Puls.* If the indications for one or the other remedy are insufficient, and the right side is affected, I generally resort to *Bell.* with excellent effect; but if the pains break out principally at night, with violent tearing distress driving the sufferer almost mad, I give *Cham.*, and if the pains are chiefly felt in the morning, I depend upon *Nux vom.* If the pains are of a crampy character, affecting chiefly the malar bones, *Plat.* helps in most cases, or perhaps *Hyosc.* In general, if the hard parts of the face are principally affected, **aching** pains are relieved principally by *Hyosc.*, *Staphys.*, or *Caps.*, more especially, if the pains are worse in the evening or by contact; *Bell.*, if the pains are complicated with itching and tingling; for burning, tearing and drawing pains I give *Staphys.*, *China*, *Hepar;* for cutting and stinging pains, *Rhus t.*

4. **General** Indications.—In accordance with general indications, **burning** pains generally require, *Bell.*, *Spig.*, *Coloc.*, *Staphys.;* **flashing** pains, *Spig.*, *Puls.*, *Bell.;* **boring,** digging pains, *Plat.*, *China*, *Phosph.;* **crampy,** squeezing pains, *Hyosc.*, *Flat.*, *Verat. alb.;* **beating** pains, *Bell.*, *Puls.*, *Phosph.;* **pressing** or aching pains, *Bell.*, *Hyosc.*, *Puls.*, *Staphys.*, *Caps.;* **tearing** pains, *Bell.*, *Caust.*, *Coloc.*, *Verat. alb.*, *China*, *Staphys.*, *Hep.;* **drawing** pains, *China*, *Hep.*, *Phosph.*, *Verat. alb.;* **cutting** pains, *Bell.*, *Rhus;* **stinging** or stitching pains, *Puls.*, *Coloc.*, *Verat. alb.;* **jerking** pains, *Puls.*, *Spig.;* **itching** and **tingling,** *Bell.;* if the pains set in principally **at night,** *Cham.*, *Bell.*, *Caust.*, *China*, *Puls.*, *Plat.;* **early in the morning** or in the forenoon, *Nux vom.*, *Spig.*, *Bell.;* in the **evening** or afternoon, *Puls.*, *Bell.;* if the pains are aggravated by **contact,** *China*, *Hepar*, *Coloc.*, *Spig.*, *Staphys.;* if aggravated by **eating,** *Phosph.*, *Spig.;* if

by talking and opening the mouth, *Phosph.;* if by damp weather, *Spig., Rhus t., Verat. alb.;* if the right side is chiefly affected, *Bell., Caust., Plat., Verat. alb.;* if the left, *Coloc., Cham., Nux v.*

5. If the pains are accompanied by heat in the head, *Acon., Arn., Bry., Staphys.;* vertigo, *Bell., Plat., Phosph.;* swelling of the face, *Bell., Spig., Plat., Phosph., Coloc.;* lachrymation, *Bell., Spig., Puls.;* copious discharge of mucus from the nose, *Bell., Spig., Puls.;* great restlessness and præcordial anguish, *Acon., Arsen., Spig.*

## 2. Various Phenomena in the Face and on the Lips.

1. **Swelling of the Cheeks.**—For such a swelling, which is almost always a consequence of toothache or at least in relation with decayed teeth, I always give first, if the patient complains of a good deal of headache or even vertigo, *Bell.;* if this does not remove the swelling, and the pains continue violently throbbing and tearing, I have recourse to *Merc.*, which most commonly brings the swelling to a head in less than 24 hours, or, at any rate, modifies the condition so that *Hepar* will do the rest. If such a swelling is very hard and tense, it can sometimes be dispersed by *Arn.*, and if it is very red and hard, by *Cham.* On several occasions I have likewise had an opportunity of verifying Hering's statements in favor of the curative powers of *Bell.* in yellowish-red swellings with an offensive odor from the mouth; in my hands *Bell.* has shown itself on many occasions as specific as *Laches.*, if the swelling has a bluish-red appearance.

2. **Erysipelas of the Face.**—For smooth erysipelas, I scarcely ever require any other medicine than *Bell.* 30th, three globules in water, a teaspoonful every three hours, in order to achieve a perfect cure; only if the erysipelas invades the hairy scalp, I invariably resort to *Rhus t.* which I likewise give, as soon as the inflammation becomes vesicular. If in rare cases neither *Bell.* nor *Rhus t.* helps, I have derived good effects from *Apis*, if the redness is rather pale, and from *Laches.*, if the redness has a dark-bluish appearance. *Arsen.* has done most good, if the erysipelas runs an irregular course, shifting about from one place to another for a length of time, and attended with considerable prostration of strength. If this wandering erysipelas does not

impair the patient's constitutional strength, *Graph.* very often proves sufficient to a cure. If the erysipelas disappears suddenly or is suppressed by external applications, I know of no better remedy than *Cupr.* to remove the threatening cerebral symptoms as soon as possible. If *Bell.* had not yet been used in the case, it likewise may render eminent service, likewise *Bry.*, after using which the erysipelas sometimes re-appears in its fullest bloom. The most dangerous cases are those of sickly, debilitated individuals in whom the erysipelas disappears of itself, without any known cause, most probably on account of an inherent want of vital power. I have had a case of this kind where the enfeebled patient showed ominous cerebral symptoms the evening previous; in spite of repeated doses of *Bell.* the erysipelas had totally disappeared the next morning, and a frightful irritation of the meningæ, with furious delirium, set in, to which the patient, who had been sent to the hospital, succumbed on the third day.

3. **Swelling of the Lips.**—For swelling of the upper lip, with or without hardness, *Bell.* proves a sufficient remedy in most cases; next to *Bell.* we have *Merc.*, *Sulph.* and *Calc.* The most efficient remedies for the cracking and bleeding of the lips are: *Arsen.*, *Bry.*, *Carbo veg.* and *Ignat.*

4. **Ulcers of a benign kind** on the cheeks and lips.—In simple ulcers on the lips I have likewise found *Bell.* an efficient remedy, and if it did not help the case, *Arsen.* In the case of persons in whom these ulcers re-appear from time to time, I have only been able to extirpate this disposition by the use of *Sulph.* and *Silic.* I can make the same remark of the ulcers on the cheeks of scrofulous children, which are likewise very much benefitted by *Bell.* and *Arsen.*, but whose re-appearance can only be prevented by the use of *Sulph.*, *Calc.* and *Silic.* at long intervals. A salivary fistula of six years' standing, which had perforated the left cheek and for which the patient had tried every kind of treatment in vain, was radically cured in a few weeks by means of a watery solution of *Calc.* 30th, two globules; an improvement showed itself at once in the first week, and progressed without interruption until a complete and permanent cicatrix had formed.

5. **Carcinoma** and **Schirrus** of the face and lips.—In the

schirrous indurations of these parts not only *Conium* and *Silic.*, but likewise *Bry.*, even in the 30th attenuation accomplish a great deal, only the same medicine which the patient takes internally, has likewise to be applied to the induration externally, in a solution of equal strength. In very few cases, however, one remedy will be found sufficient, but, in order to complete the cure, all three remedies will be required in most cases, and even, besides these three, *Sulph.* and *Calc.*, as intercurrent remedies. I have often been obliged to pursue such a course. For phagedænic carcinomatous ulcers *Arsen.* is the first remedy, although *Conium* and *Silic.*, and no less *Sulph.* are sometimes useful as intercurrent remedies. What Dr. Ivan states in Rueckert, concerning an ulcer that was cured by *Phosph.*, was certainly no cancer, although so pronounced by allopathic practitioners, but a purely *herpetic* sore, such as are easily cured by *Bell.* and *Silic.* We might perhaps with more propriety regard as a carcinomatous ulcer the one which Gaspary cured with *Nux v.*, which had arisen after the patient had picked off a black scurf from an incipient induration in the lower lip that had developed itself after long grief and sorrow.

## CHAPTER VIII.

## AFFECTIONS OF THE TEETH AND GUMS.

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### 1. Toothache.

What I have said of headache and faceache, likewise applies in the highest degree to toothache. A practitioner who has not certain points of support to fall back upon, but has to pick out his remedies in the ordinary or clinical repertories without being guided in such a task by positive rules, can easily spend weeks before hitting upon the right remedy, and will find it so much more difficult to accomplish this feat the more comprehensive the Repertory he makes use of. It is true that among the several hundred remedies of our Materia Medica we may find one here and there which, in certain circumstances, may alone be capable of curing a toothache that had defied all other remedies, but such cases are exceptions, and, after the beginning practitioner has appropriated for his use a small number of remedies that help in *most* cases and from among which he will not find it difficult to select the right remedy, he may, in exceptional cases, if his smaller list should fail him, apply to larger Repertories for advice and information. The number of remedies which I have used for toothache for the last forty years, is exceedingly small, and the exceptions where I have to use other remedies, very few. Here too I distinguish several kinds of toothache in conformity with their respective causes.

1. Toothache from hollow, **decayed teeth.**—If no other remedies are indicated by specific symptoms, I always give first *Cham.* 30th, two globules dry on the tongue, without reference to sex, age or business; by this means I have removed the toothache of a number of persons by means of a single dose, after which the teeth decayed in the long run without a return of the pain. If the pains have lasted for some time and *Cham.* does not relieve

them, I resort, according to indications, either to *Puls.* or *Antim. cr.*, one of which will always help very speedily if the other does not. Only in a few cases I have been obliged to resort to other remedies and in such circumstances have found *Merc.* most useful, if the pains shoot more particularly *at night* from the teeth to the ear and head, and are made worse by the contact with cold as well as warm things, *Staphys.*, for a drawing and tearing pain, especially in the roots of the decayed teeth, or the pains shoot into the ear, with throbbing in the temple and aggravation by chewing and eating, and by drinking cold liquids; or *Bry.* for a sensation as if the nerves were bare and touched by the air, with a sensation as if the teeth were loose; the pains are made worse by contact with warm things, as well as by chewing. If none of these remedies help, *Calc.* or *Silic* may still be found very useful.

2. Toothache from **rush of blood** to the head.—If the cheeks are very much flushed and hot, smelling of *Acon.* relieves the pains in an instant; if *Acon.* does not help, *Bell.*, *Cham.* or *Hyosc.* will; if the face is very pale during the toothache, *Puls.* helps sometimes, and if the veins on the forehead and hands are very much distended, *China* or *Arn.* If this kind of toothache continues to return and cannot be relieved by the above mentioned remedies or by *Bry.*, *Calc.* will very often afford relief.

3. **Nervous** toothache.—This toothache, which is of common occurrence and most frequently attacks females, is most speedily and certainly relieved in most cases by causing the patient to smell of the remedy; most generally, if *Acon.* does not afford immediate relief, of *Coff.*, especially if the patients are beside themselves with pain, cry and tremble, are tormented with anguish and the toothache is unbearable; if these symptoms are caused by abuse of coffee, *Cham.* helps very frequently, more particularly if the pains rage at night, with a beating, digging or stinging distress in the tooth and redness of the cheek of the affected side; or *Ignat.* if the teeth feel sore or sensitive, and the toothache is worse after drinking coffee, smoking or eating, likewise early in the morning and evening; or *Nux vom.*, especially if the toothache attacks persons of an ardent and irascible temper, is aggravated by mental labor and in the open air, and comes on early in the morning while the patient is lying in bed. *Bell.*, *Hyosc.* and *Spig.* are

likewise very useful in such cases, *Bell.* more particularly if the toothache alternates with, or is accompanied by a maddening headache; *Hyosc.* in similar circumstances, in the case of sensitive, irritable individuals, with violent throbbing in the cheeks, or even delirium and disposition to escape, *Spigel.*, if the toothache comes on typically, affecting all the teeth at once, or flashes through the crowns and roots of single teeth with a jerking fierceness that extorts cries.

4. **Rheumatic** toothache.—In this case the remedies that deserve our first consideration, are always *Merc.* and *Puls.; Merc.* more particularly if a stinging and tearing distress is felt in one whole side of the face as far as the ears and temples, with ptyalism, night-sweats, swelling and inflammation of the gums and aggravation by the warmth of the bed; *Puls.* for the same pains in one side of the face, with otalgia, recurrence of the pains in the evening, liability of the gums to bleed, chilliness, paleness of the face, aggravation by warm food, warm rooms and the warmth of the bed. Likewise *Bry.*, if the tearing distress affects principally the molar teeth and even the whole head and cheeks, or the pains shift from one tooth to the other, with sensation of **looseness** or **elongation**, aggravation by warmth, **moving** the muscles of mastication or the head, and lying on the sound side; *Cham.* for nocturnal tearing and stitching pain, especially when caused by taking cold while perspiring, the pains are intolerable, the submaxillary glands are swollen, the toothache returns after eating or drinking, and is accompanied by swelling and redness of the affected side; *Rhus t.*, if the pain sets in after one had got wet, is worse at night or in the open air, or abates in warmth. *Nux v.* and *Spig.* may likewise prove useful in such a case if indicated by the symptoms to be mentioned in subsequent numbers.

5. **Arthritic** toothache.—The main remedies are: *Nux vom.*, *Spig.*, *Bry.*, *Rhus t.*, *Sep.*, and sometimes, if the toothache assumes a chronic form, *Lyc.*, *Calc.* and *Sulph.*, according as they may be indicated by the symptoms to be mentioned in the following numbers.

6. **Special indications** according to sex, temperament and particular causes.—For **females** the following remedies are particu-

larly suitable: *Puls.*, *China*, *Bell.*, *Calc.*, *Cham.;* at the time of the **menses**, *Cham.*, *Coff.*, *Calc.;* while **nursing** an infant at the breast, *China*, *Carbo veg.;* during **pregnancy**, *Sep.*, *Calc.*, *Bell.*, *Hyosc.*, *Puls.* and *Magnes. carb.*, the last-named remedy being scarcely ever suitable in other circumstance; for **children**, *Acon.*, *Cham.*, *Bell.*, *Merc.*, *Puls.;* for persons of an **irritable**, disputative disposition, *Bry.*, *Cham.;* of an **irascible** temper, *Bry.*, *Nux vom.;* for persons of a weeping, quiet, **sad mood**, *Ignat.*, *Puls.*, *Rhus t.;* for **nervous** individuals whom the pain drives beside themselves, *Acon.*, *Coff.*, *Hyosc.*, *Cham.;* for **coffee-drinkers**, *Nux vom.*, *Cham.*, *Merc.;* after **taking cold**, *Acon.*, *Cham.*, *Merc.*, *Dulc.*, *Rhus t.*, the latter especially after one gets soaking wet; *Bell.*, *Nux vom.*

7. Indications in accordance with **particular** pains.—**Maddening** pains, driving one beside oneself, *Acon.*, *Coff.*, *Cham.*, *Hyosc.*, *Verat. alb.;* **boring**, digging pains, *Bell.*, *Calc.*, *Cham.*, *Nux vom.*, *Spig.*, *Staphys.;* **throbbing** pains, *Acon.*, *Bell.*, *Cham.*, *Calc.*, *Hyosc.*, *Puls.*, *Sulph.;* as if **air** were **getting into** the tooth, *Bry.;* as if the teeth were **elongated**, *Bry.*, *Cham.*, *Ars.*, *Rhus t.*, *Hyosc.*, *Nux vom.;* as if the teeth were **loose**, *Bry.;* if the teeth are **really loose**, *Merc.*, *Nux vom.*, *Cham.*, *Hyosc.*, *Arsen.*, *Rhus t.;* for **tearing** pains, *Merc.*, *Puls.*, *Bell.*, *Cham.*, *Bry.*, *Rhus t.*, *Hyosc.*, *Spig.;* for **jerking** pains in the teeth, *Puls.*, *Bry.*, *Merc.*, *Cham.*, *Nux vom.*, *Sulph.*, *Spig.;* as if the **nerve** were suddenly **pulled at and then let loose**, *Puls.;* as if **sore** and bruised, *Ignat.*, *Rhus t.*, *Bell.*, *Calc.;* if whole **rows of teeth** ache, *Merc.*, *Cham.*, *Rhus t.*, *Staphys.;* if a whole **side of the face** is affected, *Puls.*, *Cham.*, *Merc.*, *Rhus t.;* if the pains involve **the face** and malar bones, *Nux v.*, *Merc.*, *Acon.*, *Puls.*, *Hyosc.*, *Rhus t.*, *Sulph.;* involving the **cheeks** and malar bones, *Bell.*, *Bry.*, *Sil.*, *Spig.;* shooting into the **ears**, *Merc.*, *Puls.*, *Cham.*, *Bell.*, *Sep.*, *Rhus t.*, *Staphys.*, *Sulph.;* involving **the eyes**, *Bell.*, *Puls.*, *Staph.*, *Spig.;* involving the whole **head**, *Merc.*, *Puls.*, *Nux v.*, *Bry.*, *Hyosc.*, *Cham.*, *Rhus t.*, *Sulph.*

8. Indications according to **aggravating** circumstances.—If worse by **contact**, *Bell.*, *Bry.*, *China*, *Rhus t.*, *Arsen.*, *Puls.*, *Arn.*, *Merc.*, *Staphys.;* if the tooth is touched **with the tongue**, *Merc.*, *China*, *Carbo veg.*, *Ignat.;* if aggravated by the **motion** of the mouth, *Cham.*, *Nux v.;* by **mastication** especially, *Nux vom.*, *Bry.*, *Carbo veg.*, *Staphys.*, *Sulph.*, *Ars.*, *Merc.;* when **pressing** the teeth **together**,

*China, Hep., Sep.;* in general, when **moving** the body, *Bry., China, Nux vom.;* worse **after eating,** *Cham., Merc., Nux vom., Ignat., Staphys., Bry.;* **while eating,** *Carbo veg., Puls., Bell., Sulph.* (compare mastication); worse from **drinking,** *Cham.;* from drinking **tea,** *Ign., China;* **wine** or brandy, *Nux vom., Ars., Ignat.;* **coffee,** *Cham., Ignat., Nux vom.;* worse in the **open air,** *Nux vom., Bell., Bry., Rhus t., Staphys., Sulph., China;* especially **in the wind,** *Sep., Puls., Rhus t.;* especially by a **current of air,** *Calc., Sep., Bell., Sulph., China;* worse by **mental exertions,** *Nux vom., Bell., Ignat.;* worse by **noise,** *Bry., Ars., Calc.;* if others **talk,** *Bry., Ars.;* worse by **cold,** *Arsen., Calc., Ant. cr., Merc., Sulph.;* especially by **cold air,** *Merc., Bell., Sulph., Hyosc.;* by **cold** water, especially by **drinking** it, *Merc., Nux vom., Puls., Cham., Staphys., Sulph., Antim. cr., Bry., Calc.;* especially by **washing** with cold water, *Merc., Sulph., Calc.;* by **drawing** cold air into the mouth, *Nux vom., Merc., Bry., Bell., Sulph., Calc.;* by contact with **hot** or **warm** things, *Bell., Spig., Coff., Puls., Cham., Bry.;* especially by **warm food,** *Bry., Cham.;* especially by **warm drinks,** *Cham., Merc., Nux vom.;* in a **warm room,** *Puls., Cham., Sulph.;* **in bed,** *Merc., Puls., Cham., Antim. cr., Bry., Bell.;* in a **recumbent posture,** *Ignat., Rhus t.;* lying on the **sound side,** *Ign.;* on the **affected** side, *Arsen.;* during **rest,** *Rhus t.;* **sitting** especially, *Puls., Rhus t.;* by **picking** one's teeth, *Puls.;* by **smoking,** *Ignat., Bry.*

9. **Indications according to the time of day.**—Worse in the **evening,** *Puls., Merc., Bell., Antim. cr., Nux v., Rhus t., Ignat., Bry.;* in bed, **in the evening,** *Merc., Antim. cr.;* especially when **falling asleep,** *Ars.;* worse **at night,** *Merc., Cham., Puls., Bell., Calc., Rhus t., Staphys., Arsen., Sulph., Silic., Bry., Magnes. carb., Coff.;* **before midnight,** *Bry., Bell., Cham.;* **after midnight,** *Merc., Staphys., Nux vom.;* early **in the morning,** in general, *Nux v., Bell., Ignat., Carbo veg.;* especially when on the point of **waking,** *Nux v. Bell., Carbo veg.*

10. **Indications according to ameliorating circumstances.**—Better when **sitting up** in bed, *Arsen., Merc., Rhus t.;* when **pressed** upon, *Puls., China, Bell., Rhus t.;* in the **open** air, *Puls., Bry., Ant. cr.;* by **walking** about, *Puls.;* in the **cold,** *Puls.;* especially by **cold water,** *Bry.;* by **touching** the tooth with a finger dipped **in cold water,** *Cham.;* especially in **cold air,**

*Puls.;* by placing the **cold hand** on the cheek, *Rhus t.;* in a **recumbent posture,** *Merc.;* lying on the **affected** side, *Bry.;* during **rest,** *Merc.;* **picking** the tooth until **blood** is drawn, *Bell.;* in **warmth,** *Arsen., Merc., Puls., Rhus t., Nux v., Staphys.;* by **smoking,** *Merc.*

11. **Indications** according to **accessory ailments.**—If attended with **rush of blood** to the head, *Acon., Bell., Hyosc., Calc., Bry., China, Cham., Arn.* If the face is **flushed,** *Acon., Bry., Nux vom., Bell., Cham., Arn.* **Yellowness** of the face, *Puls., Sep., Spig.* **Swelling of the cheek,** especially, *Merc., Bell., Nux v., Cham., Arn., Puls., Calc., Sulph.* **Swelling of the gums** especially, *Merc., Staphys., Nux v., Sulph., Bell., China, Rhus t.* **Pains** in the **gums,** *Merc., Staphys., Carbo veg., Calc.* With **ptyalism,** *Merc., Dulc., Bell., Rhus t.;* **dryness** of the mouth or throat, *Bell., China;* without thirst, *Puls.;* swelling of the **submaxillary glands,** *Cham., Dulc.;* with **pains in the limbs,** *Bry., Merc., Cham., Rhus t., Puls.;* with **diarrhœa,** *Cham., Rhus t., Merc.;* with **constipation,** *Nux v., Bry., Staphys.;* with **fever,** *Acon., Merc., Bry., Rhus t., Calc.;* **chilliness,** *Puls.;* **cold hands** and tips of the fingers, *Arsen.* **Irritable,** sensitive mood, *Acon., Bry., Cham., Nux v.;* **weeping,** sad mood, *Puls. Rhus t.;* great **nervousness** and restlessness, *Acon., Coff., Cham., Hyosc., Verat. alb.*

## 2. Various Appearances on the Gums.

1. **Scurvy of the Gums.**—The principal remedies always are *Merc.* and *Carbo veg.;* in mild cases, if the trouble accidentally originates in a cold, with or without salivation, *Dulc.* is the remedy; if it originates in a want of fresh air, in the case of individuals whose habits are exclusively sedentary, *Nux v.* or *Caps.* should be given, and if caused by abuse of salt, *Carbo veg., Arsen.* or *Coch.* which has rendered me signal services in such cases. If the disorder originates in abuse of Mercury, we may depend, beside *Carbo veg.,* upon *China, Hep., Laches.* and even *Arsen.* If the gums bleed and there is a foul odor, *Carbo veg.* is often indispensable, and if gangrene threatens to supervene, *Arsen.* or *Laches.;* if hectic fever sets in, and *Carbo veg.* does not help, *Arsen.* should be given. [In scurvy of the gums, *Merc. iod.* and *Hydrastis can.* are important remedies; weak solutions of *Permang. of Potash* or *Carbolic acid* may be used as gargles. H.]

2. **Various symptoms** at the gums.—For abscesses, the most efficient remedies are, *Bell.*, *Merc.*, *Nux v.*, and if they return frequently, *Caust.* If the gums **recede** from the teeth, *Merc.*, *Carbo veg.*, *Phosph.*, *Staphys.*, *Phosph. ac.* If the gums **bleed** readily, *Carbo. veg.*, *Natr. mur.*, *Merc.*, *Phosph.*, *Phosph. ac.*, *Calc.*, *Caust.*, *Puls.*, *Rhus t.* If **blisters** break out on the gums, *Natr. mur.*, *Staphys.* If the gums **ulcerate** and **suppurate**, *Merc.*, *Carbo. veg.*, *Caust.*, *Staphys.*, *Arsen.;* for **fistulous ulcers**, particularly, *Calc.*, *Caust.*, *Sulph.* If the gums are simply **swollen**, *Merc.*, *Staphys.*, *Nux v.*, *Bell.*, *Bry.*, *Sulph.*, *Hep.*, *China*, *Rhus t.;* if the gums are **swollen** and **inflamed**, *Merc.*, *Nux v.*, *Bell.*, *Carbo veg.*, *Caps.*, *Natr. mur.;* if the gums are **painful**, *Merc.*, *Carbo. veg.*, *Arsen.*, *Staphys.*, *Calc.*, *Hepar*, *Puls.*, *Cham.;* if the gums are **whitish** and **pale**, *Merc.*, *Staphys.;* if they **burn**, *Arsen.*. *Merc.*, *Bell.*, *Cham.;* if very **red**, *Merc.*, *Bell.*, *Cham.;* if **spongy**, *Merc.*, *Carbo veg.*, *Staphys.*, *Sulph.*

### 3. Dentition of Children.

The principal difficulties that may arise in consequence of this process are: 1, nervous irritation; 2, fever; 3, spasms and convulsions; 4, spasmodic cough; 5, constipation or diarrhœa; 6, a peculiar exanthem.

1. The **nervous irritability** of teething children is most commonly speedily relieved by *Coff.* or *Arsen.;* after smelling only once of either of these remedies, the children sometimes fall asleep. If neither relieves, *Bell.* sometimes has an excellent effect, especially in the case of obstinate children; *Cham.* in the case of children who suffer much with colic.

2. **Fever** generally yields without exception to *Acon.* in solution; very seldom only it will be necessary to give *Bell.*, *Cham.* or *Silic.* in order to prevent its return.

3. If **convulsions** arise, and they have not yet reached a high degree of intensity and the children start up during sleep as in affright, an attack can sometimes be prevented by *Ignat.;* or, if the children moan and cry a good deal, by *Cham.* If neither of these remedies helps, or if the spasms have already become very violent, *Bell.* is undoubtedly the most efficient remedy in such a case,

with which I have arrested the most violent convulsions of this kind in a very short period of time. If, after such spasms, the children incline to bore their heads into the pillows, and turn alternately pale and red, *Sulph.* will have to be given without delay, and if this does not remove this tendency in two or three days, *Calc.*

4. If the children are attacked with a **spasmodic cough**, almost like whooping-cough, *Ipecac.* helps in most cases, and, if this is not sufficient, *Cina;* these two remedies will even prove very efficient, if more or less severe paroxysms of spasm should supervene during the cough. If the spasms only affect the chest, and *Ipecac.* does not afford any relief, *Cuprum* will be found eminently satisfactory.

5. If the **diarrhœa,** which often accompanies the teething, becomes too copious, *Merc.* generally affords speedy relief, if not, *Sulph.* most certainly. If constipation sets in, which is always an unpleasant change, and it lasts several days, *Bry.*, relieves this condition most speedily; if not, *Nux v.*, or perhaps *Magnes. mur.* will accomplish this result.

6. If the teeth are indisposed to **break through** the gums, *Sulph.* often helps, but more particularly *Calc.;* these remedies not only facilitate the appearance of the teeth, but likewise prevent the disposition to the constant return of convulsions which so often complicate the process of teething.

## CHAPTER IX.

## AFFECTIONS OF THE MOUTH AND TONGUE.

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### 1. Affections of the Buccal Cavity.

1. **Aphthæ** and **small ulcers.**—For aphthæ the chief remedy is *Merc.*, even if not only the buccal cavity, but the gastro-intestinal mucous membrane has been invaded. If the improvement initiated by *Merc.*, ceases after five or six days, *Sulph.*, will, in such a case, almost always afford relief, and, if *Sulph.* is not sufficient, *Calc.* I have often seen excellent effects produced by *Borax* and *Sulph. ac.*, but they never equalled the effects of *Merc.*, *Sulph.* and *Calc.* I accede most heartily to Kreussler's recommendation of *Arsen.* for malignant, gangrenous aphthæ. For the small aphthous ulcers, which not only trouble children during the period of dentition, but likewise adults, I have not only given with success *Staphys.* and *Merc.*, but very frequently also *Bell.*, *Borax*, *Nitr. ac.* and *Natrum mur.*

2. **Stomacace.**—If attacking children, I likewise resort to *Merc.* with the best result, after which I frequently give *Carbo veg.* or *Borax.* If originating in gastric disorders in the case of adults, I often derive the best advantage from *Capsicum* in the case of fat people, and from *Nux vom.* or *Sulph.* in the case of thin persons; for rheumatic stomacace I find *Dulc.* or *Merc.* excellent; for scorbutic, *Carbo veg.*, *Staphys.*, *Merc.* and *Natr. mur.*, and for mercurial stomacace, *Carbo veg.*, *Dulc.*, *Laches.*, *Calc.*

3. **Fetor of the mouth.**—If this trouble sets in unaccompanied by any other morbid symptoms, the most efficient remedies for it are *Arsen.*, *Carbo veg.*, *Arn.*, *Bell.* and *Merc.*, also sometimes, *Puls.*, *Rhus t.*, *Sulph.* and *Sil.;* and if the fetor is particularly marked early in the morning, *Arn.*, *Bell.*, *Silic.*, *Nux v.*, *Sulph.*

4. As regards **special indications,** the following remedies

are best adapted to **ulcers** in the mouth: *Merc.*, *Nitr. ac.*, *Natr. mur.*, *Staphys.*, *Arsen.* and sometimes *Hell.* For **swelling** and soreness of the mucous lining, *Merc.*, *Dulc.;* for **ptyalism,** *Dulc.*, *Merc.*, *Nitr. ac.*, *Natr. mur.*, *Hell.;* for **fetor** from the mouth, *Merc.*, *Carbo veg.*, *Nitr ac.*, *Dulc.*, *Hell.*, *Nux vom.;* for **swollen gums** especially, *Carbo veg.*, *Nitr. ac.*, *Natr. mur.*, *Nux vom.;* for **bleeding gums,** *Merc.*, *Carbo veg.*, *Natr. mur.*, *Nitr. ac.;* for **glandular swellings** on the neck, *Dulc.*, *Hell.*, *Merc.;* for **diarrhœa** existing at the same time, especially *Merc.*, *Nitr. ac.*, *Arsen.*

### 2. Ptyalism, Salivation.

For rheumatic ptyalism I know of no better remedy than *Dulc.* Some time ago I had an opportunity of witnessing the marvelous curative powers of this drug in the case of a girl who, in consequence of her sleeping under an open window, was attacked with stiffness of the lower jaw and profuse ptyalism. The saliva flowed unceasingly day and night, causing a cluster of blisters from the mouth to the chest. Having made vain efforts to discover the true cause of this trouble, I gave for eight days *Merc.*, *Kali chlor.*, *Natr. mur.*, *Nitr. ac.* and *Phosph.* in all possible doses, when I accidentally obtained a true knowledge of the cause that up to this time nobody had thought it worth mentioning; I now gave *Dulc.* 30th, two globules, after which the flow of saliva diminished at once and ceased completely in three days. [I have performed similar cures with *Acon.* H.]

### 3. Affections of the Tongue.

1. Simple **glossitis,** inflammation of the tongue.—The very best remedy is undoubtedly *Merc.*, next to which I rank *Laches.*, and likewise *Apis*, which I have used with great effect in one case, together with *Merc.* The cure is sometimes completed by *Bell.* if *Merc.* no longer improves the case. [In phlegmonous glossitis *Acon.* is indispensable. H.]

2. **Ulcers and Indurations.**—For indurations in the substance of the tongue, *Merc.* is very often the best remedy, likewise *Bell.*, and even *Silic.; Bry.* may likewise be given with good effect.

**Carcinomatous** ulcers require above every other remedy *Arsen.* or *Silic.;* both these remedies cure such ulcers with tolerable speed, provided they have not spread too far.

3. **Ranula.**—So far I have cured most cases of ranula that I have had to treat, with *Merc.;* only in one case where *Merc.* seemed unable to effect a cure, I have had to complete it with *Thuja;* and in another case, where *Thuja* had effected the beginning of an improvement, I had to wind up the treatment with *Nitr. ac.* and *Merc.*

4. **Pain in the tongue,** glossalgia.—In two cases of this kind that I have had to treat, one of which was characterized by an intense **ulcerative pain,** and the other by an intolerable **feeling of soreness as if scalded,** the former case was cured by *Calc.* and the latter by *Caust.*

## CHAPTER X.

## AFFECTIONS OF THE FAUCES.

### 1. Inflammations of the Throat according to their various kinds.

In reality the dogmatic classification of the various forms of sore throat as angina faucium, angina uvularis, angina pharyngea, angina tonsillaris, etc., is anything but practical, for the reason that it very rarely happens that a single part of the throat is inflamed according as the books teach. The only practically valuable classification is a division of the various forms of sore throat either in accordance with their various causes or with the nature of the pathological process. This leads me to adopt the following kinds: 1, **phlegmonous** sore throat; 2, **aphthous**; 3, **diphtheritic**; 4, **catarrhal**; 5, **rheumatic**; 6, **gangrenous**. These forms include in my opinion everything that can be said of inflammation of the throat.

1. **Phlegmonous** sore throat and **tonsillitis.**—If I embrace these two kinds under one heading, it is because a phlegmonous sore throat never occurs in reality, without first affecting the tonsils. Except the diphtheritic, aphthous and gangrenous inflammation, phlegmonous sore throat is of most importance, a catarrhal or rheumatic angina being generally so slight that the patients themselves regard it either little or not at all and that it readily yields to treatment, being scarcely ever like phlegmonous sore throat, attended with fever or other important complicating symptoms. Nor does the treatment of phlegmonous sore throat present any difficulties to the homœopath who knows how to manage it properly, and can in most cases be easily cured in three or four days, provided the patient had not been losing his time and chances under allopathic treatment. If there is considerable febrile excitement, I generally commence the treatment with *Acon.* 30th, three globules in a watery solution, of which I give a teaspoonful every three hours, after which, if the tonsils are very much swollen,

I change to *Bell.*, more particularly if the patient complains of a good deal of headache, and rush of blood to the head. If this does not help, I give, according to circumstances, *Hep.*, if the pains during deglutition are very severe, glancing and dart to the ear and cervical glands, with severe drawing pains in the nape of the neck; or *Laches.* if the neck is very sensitive to the least touch, and the symptoms are much worse, after the patient wakes from sleep; or *Silic.*, if the throbbing and lancing pains and the swelling of the tonsils continue to increase in spite of *Bell.* and *Hep.* If an abscess begins to form, which *Bell.* had been unable to prevent, I at once resort to *Merc.*, which generally causes the abscess to discharge in less than 24 hours, but which must never be given prematurely; for, if the abscess is not yet sufficiently ripe, this agent often increases the inflammation and renders it more obstinate. If the tonsils become indurated, *Ignat.* often helps, which will likewise be found indicated by flat, open ulcers on the tonsils; although ulcers that break out rapidly and spread extensively, most commonly require *Bell.;* slowly-arising and rather painless ulcers finding their chief remedy in *Merc.* If in this kind of phlegmonous angina with swelling, the velum palati is swollen rather than the tonsils, I prefer, *Phosph.*, *Arsen.* or *Bry.*, if neither *Acon.* nor *Bell.* helps; or if the uvula is the most swollen part, I give *Coff.* or *Laches.* Chronic swelling of the tonsils requires particularly *Baryt.*, *Sepia*, *Sulph.* or *Calc.*

2. **Aphthous** angina faucium.—These inflammations are characterized by small, whitish, flat **ulcers** on the tonsils; if they are not soon relieved by *Ignat.*, *Merc.* and *Carbo veg.*, *Nitr. ac.* is often an indispensable remedy; likewise *Caps.* in many cases, especially if the ulcers burn, with pressure in the fauces as if caused by spasm.

3. **Diphtheritic angina.**—For this disease, which is characterized by the exudation of false membranes, and, if badly managed, often terminates fatally in a few days, I formerly gave with excellent success, *Bell.*, *Bry.*, *Baryt.* and *Arsen.* and sometimes *Phosph.;* but since I have become acquainted with *Apis*, I prefer this remedy to any other, and accomplish my purpose with it better than with any other medicine. I must however warn very earnestly against the use of *Merc.* in this disease, for this medicine is not only useless, but, on the contrary, promotes the exudative

process. I have witnessed this fact in the first case of diphtheritis which I have had to treat and which terminated fatally. I prescribed a watery solution of this remedy in the 12th attenuation at five o'clock in the afternoon, with instructions to give the patient, a lady, a teaspoonful every three hours; next morning found the patches which at first were thin and inconsiderable, increased to tough membranes of the size of a dollar and the thickness of a finger, and had the misfortune of seeing my patient succumb to the disease before evening of the same day.

[In our country we depend, beside the remedies mentioned by Jahr, upon *Iodide of Mercury* second or third trituration, *Phytolacca dec.*, and upon solutions of Chlorate or Permanganate of Potash as gargles. H.]

4. **Catarrhal** angina.—This angina which most commonly attacks the pharynx, velum or uvula, yields to *Acon.;* or, in case this remedy should not help, to *Nux vom.*, more particularly if the patient complains of a rough, scraping sensation of soreness in the posterior fauces. *Bell.* likewise affords relief, if the affected parts are bright-red, with great dryness and spasm in the throat during deglutition; or *Bry.*, if the great dryness is associated with stinging and soreness, and difficulty of swallowing as from a hard body in the throat; likewise *Cham.*, if the inflammation was caused by exposure to a current of air or by suppression of the perspiration, with tickling in the throat inducing cough, sensation when swallowing as if a plug were lodged in the throat, swelling of the submaxillary glands; or *Coff.*, for an irritation of the throat in the open air, inducing cough, with elongation of the uvula, seated pain from the side of the palate to the fauces and a continued desire to swallow, excited by a sensation as if phlegm were lodged in the throat; finally *Puls.*, for a scraping and excoriating sensation in the throat, dryness of the throat without thirst, stitches between the acts of deglutition, worse in the evening.

5. **Rheumatic** angina.—This angina which is always accompanied by tearing in the nape of the neck, about the head or in the extremities, yields in most cases very rapidly to *Acon.;* if *Acon.* does not remove the difficulty entirely, *Bry.* will finish the cure in the case of persons with irritable dispositions, and *Puls.* if the patients are of gentle, quiet temperaments.

6. **Gangrenous** angina.—This form of angina, which must not be confounded with diphtheritis and develops itself out of aphthæ, requires *Ars.*, *Bell.* or *Silic.*

7. **Chronic** angina.—This requires mostly *Baryta*, *Sepia*, *Sulph.*, *Calc.*, *Laches.* or *Petrol.;* a disposition to frequent return of the disease, is met by *Baryta*, *Laches.*, *Sepia.*

## 2. Special Indications in Angina Faucium.

1. According to the **condition** of single parts.—**Swelling** of the tonsils, *Acon.*, *Bell.*, *Hep.*, *Laches.*, *Merc.*, *Calc.*, *Sep.*, *Silic.;* of the palate, *Bell.*, *Phosph.;* of the uvula, *Laches.*, *Coff.* Circumscribed **redness**, *Merc.;* radiating, *Bell.;* dark and blue, *Laches.*, *Ars.*, *Merc.*, *Sulph.;* from vascular engorgements, *Puls.* **Inflammation** fully **developed**, *Bell.*, *Laches.*, *Hep.*, *Silic.*, *Merc.*, *Baryta*, *Sepia*, *Sulph.* **Ulcers**, *Laches.*, *Ignat.*, *Merc.*, *Silic.*, *Sulph.*, *Arsen.*, *Caps.*, *Carbo veg.*, *Nitr. ac.;* watery **blisters**, *Ars.;* **gangrenous** disorganizations, *Ars.*, *Bell.*, *Sil.*, *Laches.*

2. According to the **pains.**—*a*, during deglutition, **burning**, *Bell.*, *Hep.;* **Pressure**, *Ars.*, *Merc.*, *Ign.;* feeling as of a **lump**, *Laches.*, *Hepar*, *Bell.*, *Cham.*, *Nux v.*, *Sepia*, *Sulph.;* **Stinging**, lancing, *Merc.*, *Bell.*, *Hepar*, *Nitr. ac.*, *Puls.*, *Sulph.;* **Soreness**, *Nux vom.*, *Ignat.;* **Gagging** and constriction, *Bell.*, *Laches.; b*, between the acts of deglutition, **burning**, *Ars.*, *Acon.*, *Caps.;* sensation as of a **plug**, *Ign.*, *Coff.*, *Sulph.;* **stinging**, lancing, *Ign.*, *Acon.*, *Puls.*, *Sulph.;* **soreness**, *Ign.*, *Nux v.*, *Puls.*, *Arsen.*, *Sulph.;* **constriction**, *Acon.*, *Sepia*, *Ars.*

3. According to the **aggravating** circumstances.—**Evening** exacerbation, *Puls.;* worse **at night**, *Merc.;* early **in the morning**, *Nux v.;* worse **after sleeping**, *Laches.;* after **exercise**, *Acon.*, *Bry.;* by **turning** and bending the neck, *Cham.*, *Bry.;* by **touching** the neck, *Laches.*, *Bry.;* from **drinking**, spasm, *Bell.*, *Laches.;* by lying **on the back**, worse, *Silic.*, *Acon.;* by **talking**, *Acon.*, *Nux v.;* by **cool air**, *Nux vom.*, *Coff.*, *Hepar*, *Merc.*, *Ars.*

4. According to **accompanying** ailments.—Violent **rush of blood** to the head, *Bell.;* **swelling** of the neck, *Bell.*, *Bry.;* **glandular** swellings on the neck or lower jaw, *Bry.*, *Cham.*, *Merc.*, *Nitr. ac.;*

**Ptyalism**, especially, *Merc.*, *Dulc.*, *Hep.*, *Laches.*, *Nitr. ac.;* much **phlegm** in the throat, *Merc.*, *Bell.*, *Laches.;* **fetor** from the mouth, *Merc.*, *Bell.*, *Laches.*, *Nitr. ac.;* **fever,** *Acon.*, *Bell.*, *Bry.*, *Laches.*, *Puls.*, *Merc.*

### 3. Affections of the Œsophagus.

1. For **inflammation** of the œsophagus, *Acon.* often proves sufficient; the main remedies, however, are: *Ars.* and *Rhus t.;* these two remedies have always proved more efficient in my hands than *Cocc.* and *Petrol.* My rule is to first give *Rhus t.*, and if this is not sufficient, *Ars.*

2. For **spasms** of the œsophagus the best remedies are: *Cocc.*, *Cupr.*, *Bell.* and *Hyosc.*

## CHAPTER XI.

## DERANGEMENTS OF THE DIGESTIVE FUNCTIONS.

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### 1. Morbid Appetite.

1. **Diminished appetite.**—If this affection is not attended with any actual derangement of the digestive functions, and the patient has simply no desire for food, with or without occasional nausea, the following remedies will often restore the appetite; *Nux vom.*, *Verat. alb.*, *China.*, *Sulph.*, *Calc.*, *Hep.*, *Arn.*, *Laches.*, *Silic.*, and more particularly in summer, if owing to the heat, *Bry.*, *Ant. cr.*, *Carbo veg.* If the patient experiences a real loathing of food generally, the following remedies are particularly useful, *Ant. cr.*, *Nux vom.*, *Puls.*, *Verat. alb.;* for aversion to **warm food,** *Puls.*, *Calc.;* especially to **meat,** *Sulph.*, *Puls.*, *Lyc.;* to **bread,** *China.*, *Puls.*, *Sulph.;* to **milk** especially, *Ignat.*, *Sep.;* to his habitual **smoking,** *Puls.*, *Arn.*, *Ignat.*, *Calc.* Again if the patient complains of a **bitter** taste in the mouth, *Bry.*, *Ant. cr.*, *Carbo veg.*, *Nux vom.*, *Cham.*, *Verat. alb.*, *Sulph.;* if the **food** especially tastes **bitter,** *Bry.*, *Hep.*, *Sulph.*, *Rhus t.*, *Puls.*, *China,* and if the **beverage** tastes bitter at the same time, *Puls.*, *China;* if the **meat** and butter, *Puls.*, *China;* if there is a bitter taste, **after swallowing** food or drink, *Puls.*, *Bry.*, *Arsen.;* early in the morning before breakfast, *Bry.*, *Merc.*, *Sulph.*, *Calc.*, *Silic.;* for a **foul** taste, *Nux vom.*, *Arn.*, *Merc.*, *Puls.*, *Sulph.*, *Rhus t.;* early in the morning, before breakfast, *Sulph.*, *Rhus t.;* for a **flat** taste in the mouth, *Puls.*, *China.*, *Bry.*, *Nux vom.*, *Verat. alb.*, *Sulph.*, *Rhus t.* **Insipid** taste of the food, *China*, *Nux vom.*, *Puls.*, *Bry.*, *Merc.*, *Arsen.;* for a **greasy** taste, *Caust.*, *Silic.* If the mouth tastes **as if lined with phlegm,** *Arn.*, *Rhus t.*, *Verat alb.*, *Bell.;* for a **salt** taste in the mouth, *Carbo veg.*, *Nux vom.*, *Sulph.;* of the **food** generally, *Carbo veg.*, *Sulph.;* for **sour** taste in the mouth, *Arn.*, *Nux v.*, *China*, *Calc.*, *Sulph.*; of **food** generally, *Calc.*, *China*, *Nux v.*, *Puls.;*

of **bread,** in particular, *Bell.;* **after a meal,** *Nux v., Puls., Carbo veg., Silic.;* **after drinking** especially, *Nux v., China, Sulph.;* especially after partaking of **milk,** *Nux v., Sulph., Carbo veg.;* **sweet** taste of the mouth, *Merc., Verat. alb., Sulph., China, Bry., Bell., Puls., Sulph.;* of **bread** generally, *Puls., Merc.;* of **beer** especially, *Puls.;* of **fat,** milk and meat, *Puls.;* taste of **herbs,** *Nux v., Puls., Verat. alb.;* **sharp,** acrid taste, *Verat. alb.;* **smoky,** empyreumatic taste, *Puls., Sulph.;* **earthy** taste, *China, Hep., Puls., Ipecac.;* if the patient experiences at the same time a desire for special articles of diet, see below, No. 3: **Vagaries of the appetite.**

2. **Increased appetite, canine hunger.**—For canine hunger *Calc.* and *Lyc.*, and no less *Silic.* have shown themselves the most efficient remedies in my hands; likewise *Verat. alb.* for the excessive hunger after typhus. For the voracious appetite, not exactly canine hunger, which torments some persons who are otherwise healthy, I have derived the best use from *China, Cina, Verat. alb.*, and sometimes from *Merc., Sep.* and *Sulph.* For attacks of nocturnal hunger *China* is likewise an excellent remedy. If such attacks are accompanied by waterbrash and nausea, no medicine surpasses *Silic.*, and, in the case of children, *Calc.*

3. **Vagaries of appetite,** longing for particular articles of diet, or other substances. This abnormal condition, which is sometimes an accompaniment of chronic weakness of digestion, and is generally attended with decrease of the regular appetite, often furnishes important indications for the selection of the suitable remedy in gastric complaints. I have more particularly found the following remedies indicated in this disorder; for a desire for **bitter** things, *Dig., Natr. mur.;* desire for **brandy** especially, *Hepar, Sulph., Ars., Laches.;* for **earthy** matters, **chalk, lime,** *Nitr. ac., Nux vom.;* for **spirits** generally, *Hepar, Arsen., Calc., China, Staphys., Sulph.;* for **charcoal,** in the case of hysteric women, *Cicuta, Conium;* for **dainties,** *China, Ipecac.;* for **salt** food, *Carbo veg., Calc., Verat. alb.;* for **sour,** cooling things, *Acon., Arn., Sulph., Hep., China, Arsen., Puls., Verat. alb.;* for **sweet** things, sugar etc., *China, Kali carb., Lyc., Ipecac., Amm. carb.;* for **smoked** meat, *Caust.;* for **herrings** in particular, *Nitr. ac., Verat. alb.;* for **piquant** things, *Hepar, Puls.;* for **wine** especially, *Calc., Acon., Bry., Hepar, Laches., Staphys.*

4. **Drinking-mania.**—Brandy in which an eel had been killed, is an old domestic remedy for drinking, which I have likewise used with excellent effect; but this preparation only helps *brandy-drinkers*, but is neither a remedy for wine-bibbing nor beer-drinking, for which the above-mentioned preparation is any how an impossible thing. In order to give a disgust against wine-bibbing, *Sulph*, and *Laches.*, at intervals of eight days, are the best remedies; and for brandy-drinking, if we do not choose to resort to the eel-remedy, *Hep.* and *Arsen.*, likewise at intervals of eight days. Against excessive beer-drinking I have employed in the same manner *Nux vom.* and *Rhus t.*, for the following reason. Some time ago a man who habitually drank beer to excess, was attacked with a violent headache which had probably been caused by the excessive use of adulterated beer and for which I first prescribed *Rhus t.* and afterwards *Nux vom.* For four or six weeks, after he took the last medicine, he evinced a peculiar susceptibility to the taste of beer, so that, no matter what kind of beer he drank, he found them all equally bad and finally abstained from beer altogether. At a later period I tried the same medicines as preventives, but without any great success, because it is much easier to deprive people for a week or a fortnight of wine or brandy than of beer.

## 2. Gastric Complaints.

1. **Heartburn, acid stomach, waterbrash.**—The so-called heartburn, which is always a consequence of too much acidity in the stomach, finds a speedy remedy in *Nux vom.* or *Puls.*, or, if these remedies are not sufficient, in *Calc.*, *Caps.*, *China*, *Sulph.* or *Carbo veg.* If the patient only complains of a good deal of sour eructations, with or without regurgitation of the ingesta, the following remedies, beside those we have named, afford relief: *Phosph.*, *Cham.*, *Amm. carb.*, *Lyc.* and *Natr. mur.*, and if it occurs after the use of *milk*, we depend more particularly on *Calc.*, *Carbo veg.*, *Sulph.*, *China*, *Lyc.*; after eating **fat**, upon *Carbo veg.*, *Natr. mur.*, *Sepia.* The so-called **waterbrash** finds its chief remedies in: *Nux vom.*, *Bry.* and *Puls.*, and if these do not help, in, *Silic.*, *Sulph.*, *Calc.*, *Arsen.*, *Carbo veg.* and *Sepia.* If it occurs principally after eating, we derive most help from *Silic.*, *Sulph.* and *Bry.*, and if it

occurs early in the morning before breakfast, from *Nux vom.* or *Sulph.*

2. **Rumination,** chewing the cud.—This disorder, which is very little heeded, and which consists in regurgitating shortly after a meal the food that had been eaten with a good deal of relish and masticating it over again, if its taste is not altered, with the same relish as the first time, really only occurs among people who eat hastily and swallow their victuals only half masticated. However, it may set in without this circumstance, and may then become very troublesome. In such a case *Sulph.* and *Phosph.* generally relieve the disorder very speedily and permanently, in some cases likewise *Lyc.* and *Bry.*, or even *Cham.* and *Ignat.* If the regurgitated ingesta are sour, *Phosph.* and *Sulph.* are undoubtedly the best remedies.

3. **Nausea** and **Vomiting.**—Although these disorders, if chronic and not brought on by accidental causes, most commonly excite a suspicion that they originate in a more deep-seated, organic affection of the stomach, nevertheless there are cases where they are simply occasioned by a functional derangement of this viscus. I once treated an hysteric lady who, for three years past, had been frequently attacked with paroxysms of vomiting that lasted for months. She sometimes threw up a yellow or greenish fluid and at other times the ingesta. All her former physicians had diagnosed schirrus of the stomach or perforating ulcer. Although I was unable, in spite of my most careful examinations, to discover the least hardness or any other suspicious symptom, I nevertheless had a suspicion of some organic defect, when all at once the vomiting stopped after a dose of *Phosph.* 30th, and the proteus-like hysteria manifested itself in the shape of a general paralysis of the upper and lower extremities in such a manner that dorsal consumption might have been suspected but for the circumstance that the attack set in so suddenly. The vomiting, however, had ceased, nor did it return after the paralysis had entirely yielded to a dose of *Caust.* 30th, and the patient was again out of her bed and able to use her limbs as usual. Be this as it may, in treating a case of nausea and vomiting, we have not only to consider the accidental and organic, but likewise the nervous causes. Whatever be the cause, however, I always give *Ipecac.* for vomiting, as

long as the cause remains unknown to me and, if this should prove insufficient, I change to *Nux v.*, which not only affords sufficient relief for accidental, but likewise for chronic vomiting, to enable me to look round for a more appropriate remedy. As regards the special causes that may have given rise to the vomiting, *Acon.* generally helps very soon if a **sudden fright** is the cause; *Ignat.* and *Phosph. ac.* if caused by **grief** and sorrow; *Cham.* or *Bry.* after a fit of **anger** or vexation; *Ipec.*, *Bell.*, *Dulc.*, *Arsen.* or *Cupr.* after a cold; *Bry.* or *Ant. cr.* after getting **overheated**; *Ipec.*, *Puls.* or *Arn.* in most cases, after **watching** at night; *Puls.*, *Ant cr.*, *Ipec.*, *Bry.*, *Nux v.*, *Arn.* after **deranging** one's stomach; *Carbo veg.* *Nux vom.* or *Arsen.* very commonly, after intoxication; *Puls.*, or *Ignat.* after **smoking**, if persons are not used to it; after **concussion** of the brain, in most cases *Arn.*, but sometimes *Rhus* or *Bry.;* after **riding** in a **carriage** or swinging, *Cocc.*, *Arsen.*, *Petrol.;* in the case of **pregnant** females particularly, *Ipec.*, *Sep.*, *Sulph.;* if attended with **vertigo**, *Puls.*, *Ant. cr.*, *Acon.*, *Nux vom.*, *Sulph.*, *Veratr. alb.;* if the **face** is very **pale**, *Puls.*, *Ars.*, *Verat. alb.;* if the **tongue** is **clear**, *Ipec.*, *Cina*, *Verat. alb.;* if the **appetite** is **good**, *Verat. alb.;* if attended with much **singultus**, *Hyosc.*, *Verat. alb.*, *Nux vom.;* if attended with **pains** in the **stomach**, especially, *Carbo veg.*, *Arsen.*, *Verat. alb.*, *Ferr.*, *Phosph.*, *Calc.*, *Nux v.;* if attended with great **anxiety**, *Nux v.*, *Arsen.;* if **syncope** supervenes, *Verat. alb.*, *Calc.;* if attended with great **weakness** generally, *Ipec.*, *Arsen.*, *Verat. alb.;* if the **ingesta** are **vomited** up, *Ars.*, *Puls.*, *Sulph.*, *Verat. alb.*, *Ipec.*, *Nux vom.*, *Ferr.*, *Phosph.*, *Silic.*, *Sulph.;* if the **liquids alone** are vomited, *Ipec.*, *Arsen.*, *Verat. alb.*, *Silic.*, *Hyosc.;* if the **substance** vomited is **bitter**, *Acon.*, *Cham.*, *Puls.*, *Nux v.*, *Ant. cr.*, *Ars.;* if it tastes **sour**, *Fer.*, *Nux v.*, *Phosph.*, *China*, *Cham.*, *Calc.*, *Puls.*, *Sulph.;* if it looks **green**, *Acon.*, *Puls.*, *Ars.*, *Verat. alb.;* if **only mucus** is thrown up, *Ipec.*, *Puls.*, *Sulph.*, *Bell.*, *Merc.;* if it looks **black**, *Ars.*, *Verat. alb.*, *Phosph.*, *China;* if it is **watery**, *Ipec.*, *Sulph.*, *Bry.*, *Bell.;* finally, if the attacks occur chiefly **at night**, *Fer.*, *China*, *Ars.*, *Puls.* [also chiefly *Ipecac.* H.] If early **in the morning** before breakfast, *Nux v.*, *Verat. alb.;* especially **after a meal**, *Nux v.*, *Ipec.*, *Ars.*, *Verat. alb.*, *Fer.*, *Silic.*, *Phosph.*, *Sulph.;* especially **after drinking** *Ars.*, *Fer.*, *Verat. alb.*, *Silic.*, *Bry.*

4. **Seasickness.**—According to the statements of those to whom I had given *Cocc.*, *Ars.*, *Sulph.* and *Sepia* on the voyage,

it seems that *Cocc.* and *Ars.* afforded the most relief. On a short voyage on the Mediterranean I was speedily relieved by *Ars.*

5. **Hæmatemesis,** vomiting of blood.—If not arising from external violence, a blow, fall etc. on the region of the stomach, in which case *Arnica* is the specific remedy, no medicine surpasses *Ipecac.* in the curative power; in the most diversified cases, I have effected with this remedy, if not a permanent cure, at least in every case considerable relief, which very often was instantaneous. If *Ipecac.* is not sufficient, *Arsen.* will generally prove the next best remedy; this medicine may likewise be given at the outset, if the blood is dark and almost black, and a similar substance is discharged from the bowels, attended with great anguish, extreme debility and coldness of the body. If *Arsen.* does not relieve, or is insufficient and the patient feels very much prostrated, *Carbo veg.* often proves an efficient remedy. If this vomiting of blood frequently attacks people afflicted with piles and abdominal congestion, or with frequent attacks of cardialgia and vomiting of the ingesta, *Nux vom.* helps in many cases. In a case where this vomiting set in as a vicarious hæmorrhage in the place of the menses, *Hyosc.* proved very beneficial; in another case *Laches.*, and in a third *Phosph.* [In the case of plethoric, robust individuals, or of thin, wiry persons with active, nervous-bilious temperaments, *Acon.* should not be forgotten. H.]

### 3. Weakness of the Stomach and Digestive Derangements.

1. **Accidental Derangement of the Stomach.**—If caused by eating all sorts of indigestible things, the best remedies are: *Ant. cr.*, *Puls.*, *Bry.*, and *Ipecac.; Antim.* more particularly if the tongue is very much coated, with eructations tasting of the ingesta and aversion to any kind of food; *Puls.*, if the taste is foul, greasy, loamy, with chilliness and semilateral headache; *Bry.*, if attended with heat and chilliness, sensation as if the head would split at the forehead; *Ipecac.*, if the patient complains of nausea and feels as if he would vomit, with sensation in the head as if bruised. Particular remedies, after eating **fat food,** *Puls.*, *Carbo veg.*, *Tarax.*, *Sulph.*, *Ipecac.*, *Arsen.;* after eating too much **bread,** *Bry.*, *Rhus*, *Sep.*, *Sulph.;* particularly after eating too many **eggs,** *Puls.*,

*Colch.;* after chilling the stomach by **ice,** cold fruit, *Puls., Arsen., Carbo veg.;* after drinking **icy-cold water** in summer, *Carbo veg., Nux vom., Bell., Bry.;* after using **vinegar** and other acids, *Acon., Calc., Carbo veg., Arsen., Hepar, Caust., Sep., Sulph.;* after eating **fish,** especially spoiled fish, *Carbo veg., Puls., China, Rhus t.;* after drinking **coffee** to excess, *Nux v., Cham., Cocc.;* after the indiscreet use of **milk,** *Bry., Sulph.;* after **fruit** especially, *Puls., Arsen., Bry., Verat. alb.;* after **food** salted to excess, *Carbo veg., Arsen.;* after **sourkrout** and cabbage, *Bry.;* after **acids** generally, *Acon., Arsen., Hep., Sep., Staphys., Calc., Caust., Laches.;* after **smoking,** *Puls., Nux v., China;* after the excessive use of **tea,** *China, Fer.;* after **wine** or brandy, *Nux vom., Carbo veg.;* after **sour wine,** *Ant. cr.;* after **beer** that is too new, *China, Nux vom., Rhus t., Fer., Arsen., Ant. cr.;* if complicated with much **headache,** *Puls., Bry., Ipecac.;* with **eructations** particularly, *Ant. cr., Bry., Nux v., Puls., Sep., Ars.;* with **vomiting,** *Ipecac., Tart. emet., Puls., Bry., Sep.;* with **flatulence** and bloating, *Bry., China, Nux v., Puls., Phosph.;* with **colic** especially, *Puls.;* with **diarrhœa,** *Ipec., Puls., Arsen., Nux vom.;* with **sleeplessness** in consequence, *Coff., Puls.;* **fever,** *Bry., Ant. cr.; Ipecac., Nux v., Caps.;* **rash** in consequence, *Ipecac., Bry., Puls.*

2. **Chronic weakness** of the stomach.—This can scarcely ever be cured with one remedy, but very often with *Nux v., Sulph.* and *Calc.* given at long intervals. Suitable intercurrent remedies are: *Hep., Laches., Arn., Ars., Carbo veg., Lyc., China, Digit., Verat. alb.,* more particularly after the following indications: 1, especially after excessive **mental efforts,** *Nux vom., Arn.;* in the case of individuals leading a **sedentary life,** *Bry., Nux vom., Sulph.;* especially after being **deprived of sleep** for a long time, *Arn., Puls.;* after abuse of **spirits,** *Nux vom., Sulph., Ars.;* caused by **dampness** of the climate and want of fresh air, *China, Verat. alb.;* by a **blow** or strain from lifting, *Arn., Calc., Sep.;* especially after **abuse of Mercury,** *Hep., Carbo veg., Lyc., Aur.;* especially after **loss of animal fluids,** *China, Carbo veg., Sulph.;* especially after **abuse of Cinchona,** *Verat. alb., Nux vom., Arsen., Ipecac., Carbo veg., Laches.;* especially after **abuse of coffee,** *Sulph., Ignat., Merc., Nux vom.* 2, if attended with a good deal of **eructations,** *Bry., Carbo veg., Laches., Nux vom., Puls., Antim. cr., Arsen., Arn.;* with much **acidity** after eating, *Carbo veg., Nux vom., Sulph.;* **loss of appetite,** (see 1, 1.); **canine hunger** (see 1, 2.); extraordinary **longings** (see 1, 3.); **heartburn** and

waterbrash (see 2, 1.); **spoiled taste** in the mouth (see 2, 2.); frequent **vomiting,** *Ipec., Nux vom., Puls., Arsen., Ant. cr., Hep., Carbo veg., Cham., China, Bry., Verat. alb.;* (see 2, 2.); **Stomach** and pit of the stomach **painful,** *Arn., Nux vom., Puls., China, Arsen., Cham.* (see next chapter); **slow digestion,** food remains in the stomach for a long time, *China, Hep., Sulph., Calc., Puls., Arn.;* **stomach** too **easily deranged,** *Hep., Laches., Carbo veg.;* with **flatulence,** *Carbo veg., Lyc., Arn., Laches., Nux vom., Bry.;* **bowels constipated,** indolent, stool hard, *Nux v., Sulph., Calc., Hep., Bry., Verat. alb.;* with **diarrhœa,** *Ipec., Puls., Verat. alb., Carbo veg.;* 3, if scarcely anything **agrees** with one, *Puls., Hep., Sulph., Calc., Laches.;* if **bread** does **not agree** with one, *China, Sulph., Sep.;* if **every meal disagrees** with one soon after taking it, *Nux v., Sulph., Calc., Hep., Carbo veg.;* if **fat food** causes inconvenience, *Carbo veg., Puls., Sep.;* if **milk** causes inconvenience, *Bry., Carbo veg., Lyc., Sulph., Calc.;* if **acids** cause inconvenience, *Calc., Sep., Caust., Staphys., Bell., Antim. cr., Bry., Rhus t., Laches.;* if **liquids** inconvenience, *Nux v., Sulph., China, Arsen., Verat. alb., Puls., Silic., Arn., Fer., Nux v., Ignat.;* if **drinking** water inconveniences, *Puls., Acon., Cocc., Arsen., Rhus t., China, Sulph. ac., Verat. alb.* 4, Finally if the weakness of the stomach is attended with frequent **paroxysms of vertigo,** *Nux v., Puls., Arn., Ant. cr., Laches., Verat. alb.;* if with **dullness** or confused feelings **in the head,** *Nux v., Arn., Puls., Ant. cr.;* **yellowness** of the face, *Nux vom., Sep.;* **Pale** and sunken countenance, *Laches., Nux vom., Arsen., Verat. alb.;* especially **chilliness,** *Verat. alb, Carbo veg., China, Puls.;* great **weakness,** *China, Verat. alb., Ars.*

## CHAPTER XII.

## AFFECTIONS OF THE STOMACH.

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### Inflammatory Affections.

1. **Acute gastritis.**—What *Acon.* is capable of accomplishing in this affection, exceeds all belief. I have treated several violent cases of gastritis that had been caused by a cold drink, or by taking cold or chilling the stomach in some other manner, and although I never gave more than a teaspoonful of a watery solution of three globules of *Acon.* 30th, every two or three hours, yet the patients most generally improved considerably in 24 hours, and were completely restored in at most four days; even in cases where after the removal of all the threatening symptoms by *Acon.*, some unpleasant symptoms still remained, yet the cure had so far progressed that a single dose of *Bry.*, *Ipec.*, *Bell.* or *Nux v.*, according as the symptoms might require, proved sufficient to wipe out every remaining trace of irritation. It is only if we are not called to the patient at the outset of the attack, and coldness of the extremities with diarrhœa, and a sudden prostration have already set in, nothing further can be expected from *Acon.*, but *Verat. alb.*, will have to be given, or, if this should not change the aspect of the case within twelve hours, *Arsen.* I must, however, warn against the premature exhibition of these drugs; if given at the very commencement of the attack, when no diarrhœa has yet set in, but only vomiting and gagging with great anxiety, they often aggravate the disorder which *Acon.* might have cured so easily, and not unfrequently a typhoid condition with delirium supervenes. If such a change takes place, *Bell.* will be found suitable in most cases, likewise very often *Hyosc.*, if stupor and a loss of consciousness have set in.

2. **Softening of the Stomach,** gastromalacia.—Before I became acquainted with the splendid virtues of *Kreasotum*, I had already lost three children whom I treated with *Calc.* and

*Arsen.* for this disease; since I have use *Kreas.* I have not met with a single loss, although I give the remedy in a watery solution, three globules of the 30th, a teaspoonful every three or four hours. [*Secale cor.* is likewise a valuable remedy in this disease. H.]

3. **Chronic Gastritis.**—Like chronic dyspepsia, this affection likewise requires for its cure several remedies which are to be selected in accordance with the most prominent symptoms of each case. Not unfrequently a considerable period of time may be required to cure this disease; nor can a cure be effected most speedily by assaulting the patient in a senseless manner with large doses of all sorts of medicines, but by giving at long intervals a dose of the remedy that had been selected in accordance with the most particular indications. The remedies that will be found to help most frequently in such cases are undoubtedly: *Bry.*, *Nux vom.*, *Lyc.*, *Phosph.*, *Arsen.*, *Sepia*, *Sulph.;* more especially *Arsen.* for **burning** pains with great sensitiveness of the pit of the stomach to contact and frequent vomiting of the ingesta; *Bry.*, sometimes **after a blow** or bruise on the region of the stomach, and likewise after excessive exertions, or if the disorder arises from a **cold drink,** the food regurgitates very readily, and every least quantity of food introduced into the stomach, excites or increases the pain, with stitches especially during motion; *Carbo. veg.*, for a **burning sore** pain, with a great deal of acidity and troublesome flatulence; *Lyc.*, if a **burning** is experienced up the throat and in the back, or the pains generally extend to the back, with pressure and distension of the stomach after eating, inability to bear tight clothing around the hypochondria and occasional attacks of vomiting; *Nux vom.*, more particularly in the case of **old topers,** with hard pressure in the stomach after eating solid food, with or without vomiting of the ingesta, or even if a beginning of induration can be felt; *Phosph.*, likewise if an **induration** is felt with aching pains that are felt through to the back, with a good deal of sour eructations and vomiting of water, aggravation after eating, and regurgitation of fragments of food; *Puls.*, with violent, **continued pains** confined to the region of the stomach, with a bitter-sour taste in the mouth and bitter-sour vomiting of food; *Sepia*, if the **pylorus** feels **indurated,** with aggravation of the pains after partaking of the lightest kind of food, with sour eructations and vomiting of sour mucus; *Sulph.*, likewise very often is an efficient remedy after

indurations have already commenced to set in, with a good deal of empty sour-tasting eructations. (See below 2, 3: **Special Indications.**)

4. **Schirrus, Carcinoma** of the stomach.—Even in cases where a chocolate-colored vomiting had already set in, I have derived the most eminent advantage from *Phosph.* and *Lyc.*, and, in the case of simple indurations with more or less copious vomiting of mucus, acids or food, from *Lyc.*, *Kreas.*, *Phosph.*, *Nux vom.*, *Sep.*, *Sulph.*, *Carbo veg.*

5. **Perforating ulcer** of the stomach.—For this disorganization which may be suspected to exist if a rather soft swelling is perceived at a painful spot in the stomach, the pains are more or less violent, aggravated by contact, and attended with frequent vomiting of acids, mucus or recent ingesta, *Phosph.* has so far afforded me the most essential aid; in one case, however, where the diagnosis was less clear, and the patient who resided in a distant locality, afterwards died under allopathic treatment, and a post-mortem examination revealed a perforating ulcer, *Ars.* was the only remedy that relieved the symptoms, so that the patient remained free from her sufferings for four years, until after a change of domicile to a strange country, the above-mentioned relapse set in, with its fatal termination.

## 2. Cardialgia, pains in the stomach.

1. **Cardialgia, gastralgia.**—Unless other remedies are speedily indicated, I always commence the treatment in the case of males with *Nux v.*, and in the case of females with *Ignat.*, and have often succeeded in effecting rapid and permanent cures with these two remedies. I resort to *Nux vom.* more particularly in cases characterized by pressure and cramps in the stomach, with vomiting of the ingesta, more particularly if the patients are addicted to the use of coffee and brandy, or are troubled with hæmorrhoids, constipation, hemicrania and the symptoms are aggravated by coffee; *Ignat.*, if after every meal the patient experiences a pressure at the cardiac orifice and upper part of the œsophagus as if the food had remained lodged there, and likewise

if the stomach seems to hang down perfectly relaxed, or if *Nux vom.* or *Puls.* were indicated, but did not effect a perfect cure; *Cham.*, for a pressure in the pit of the stomach as from a stone, especially at night, or if *Nux vom.* had not afforded sufficient relief; *Cocc.*, especially suitable to women with scanty catamenia, of sad and weeping mood, with flow of water in the mouth and constrictive pains extending deep down in the abdomen; *Puls.*, for stinging pains, nausea or vomiting, a gnawing-tearing distress when the stomach is empty, and a pressure and pinching in the stomach after eating, and particularly if the disorder arises from derangement of the stomach brought on by eating fat food, with loose discharges from the bowels, or in the case of females with leucorrhœa and scanty menses; *Lyc.*, for chronic cardialgia, with inability to bear the pressure of the clothes around the hypochondria, and attended with spasms in the chest now and then; *Bell.*, very often in the case of females with profuse menses, and if the distress obliges one to bend backwards or to arrest the breathing; *Ars.*, if the painful pressure is accompanied by *burning*, is particularly felt after eating, and frequently excites vomiting of the ingesta; *Bry.*, if, after a meal or even while eating, the patient complains of a pressure in the pit of the stomach as from a stone, relieved by eructation, aggravated by motion and attended with constipation; *Carbo veg.*, especially in the case of nursing females, with burning, gnawing-tearing pains obliging one to bend double, worse in a recumbent posture, with frequent heartburn and inability to digest fat food; *China*, likewise very often suitable to nursing females or after any other loss of animal fluids, with acidity, bloating after a meal and after drinking, relieved by motion; *Phosph.*, for paroxysms of a contractive pain in the pit of the stomach, extending to the left hypochondrium and afterwards to the heart and left shoulder, especially if these attacks are relieved by warmth; *Ars.*, for similar attacks in the left hypochondrium, but with burning pains and vomiting; *Sepia*, often very serviceable for cardialgic pressure, in the case of women afflicted with leucorrhœa, having scanty menses and a dingy, grayish-yellow complexion. Several of the above-mentioned remedies have been so far frequently employed by me in the following order: *a*, in the case of males, *Nux v.*, *Bry.*, *Cham.*, *Carbo veg.*; *b*, in the case of females, *Ignat.*, *Puls.*, *Cocc.*, *Sep.*, and *c*, without distinction of sex, very often, *Cham.*, *Bell.* or *Phosph.*, *Lyc.*, *Calc.*,

*Ars.;* or *Ars., Nux v. Carbo veg., China.* (For more special indications see below, No. 3.)

2. **Neuralgia** of the cœliac plexus.—What *Arsen.* and no less *Phosph.* are capable of accomplishing in this affection, I am able to confirm by several cases even of a very chronic nature, where I generally effected a cure by means of three globules of the 30th attenuation and, so far, never had to give more than two doses of the appropriate remedy.

3. **Special Indications** in the various kinds of cardialgia.—1, for **burning** pains, *Ars., Carbo veg., Nux vom., Lycop., Phosph.;* **aching** pains, *Nux vom., Ignat., Bry., Cham., Lyc., Sep., Carbo veg., Phosph.;* **pressure** as from a stone, *Bry., Cham., Ignat., Calc.;* for **tearing** and griping pains, *Nux vom., Lyc., Puls., Bell., Phosph., Calc.;* feeling of **bloat,** swelling, *Bry., Lyc.;* **throbbing** pains, *Bry., Lyc., Ars., Puls.;* **sore** or ulcerative feeling, *Ars., Carbo veg., Puls., Bry., Nux vom., China;* **gnawing** pains, *Bell., Phosph., Ars., Nux vom.;* **Stinging,** lancing pains, *Bell., Bry., Puls., Ars., Phosph., Nux vom.;* **spasmodic** constriction, *Nux vom., Bry., Bell., Phosph.;* 2, if the pains extend **as far as the back,** *Lyc., Phosph., Nux vom., Ars., Carbo veg., Sep.;* **as far as the pharynx,** *Phosph., Lyc., Calc.;* **as far as the chest,** with dyspnœa, *Lyc., Cocc., Cupr., Nux vom., Bell., Sep., Phosph.;* through the **whole abdomen,** *Cocc., Nux vom., Lyc., Calc., Ars.;* 3, if the pains occur **periodically,** *Nux vom., Arsen., Sep.;* if occurring particularly early **in the morning,** *Nux vom., Ars., Calc., Lyc.;* especially **at night,** *Ars., Nux vom., Lyc.;* if aggravated by **raising oneself** and moving about, *Bry.;* if by **treading** or making a wrong step, *Bry., Puls.;* if by **moving the arms** particularly, *Nux vom.;* if by **contact** and pressure, *Ars., Bry., Lyc., Carbo veg., China;* by **pressure** of the clothes around the hypochondria, *Nux vom., Lyc.;* worse **after eating,** *Nux vom., Phosph., Ars., Lyc., Bell., Bry., Puls., China, Sep., Calc.;* after **flatulent food,** *Bell., Lyc., Bry.;* especially after eating **fat,** *Carbo veg., Puls.;* especially during **rest,** *China;* especially when **lying down,** *Carbo veg., Lyc.* 4, If **improved** by **exercise** generally, *China, Calc.;* by **bending** the body, *Bell., Bry., Cham., Ars., Nux vom.;* by **stretching** backwards and suspending respiration, *Bell.;* especially in a **recumbent posture,** *Bry.;* by **eating,** momentarily, *Phosph;* especially by **eructations,** *Bry., Cocc., Bell., Calc.;* by **warmth** generally, *Ars.;* especially by the **warmth of a**

bed, *Phosph.*, *Lyc.;* by **pressing** upon the stomach, *Bry.*, *Carbo veg.* 5, if **complicated** with a good deal of **vertigo**, *Nux vom.*, *Puls.*, *Lyc.;* with **headache**, *Nux vom.*, *Lyc.*, *Bry.*, *Sep.;* **flushed face**, *Nux vom.*, *Bell.;* **pale face**, *Ars.*, *Bell.*, *Bry.*, *Puls.*, *Lyc.;* **jaundiced face**, *Nux vom.*, *Sep.;* **waterbrash**, *Bry.*, *Puls.*, *Silic.*, *Nux vom.*, *Cocc.;* **acidity** and heartburn, *Carbo veg.*, *Phosph.*, *Nux vom.*, *Bry.*, *China*, *Ars.*, *Calc.*, *Sep.;* **eructations**, *Bry.*, *Nux vom.*, *Cocc.*, *Lyc.*, *Ars.*, *Calc.*, *Puls.*, *Sep.;* **regurgitation** of the ingesta, *Phosph.*, *Bry.*, *Nux vom.;* **nausea**, *Nux vom.*, *Cocc.*, *Lyc.*, *Sep.*, *Bell.;* **empty retching**, *Nux vom.*, *Ars.*, *Lyc.*, *Bell.;* **vomiting**, *Nux vom.*, *Ars.*, *Lyc.*, *Puls.*, *Carbo veg.*, *Cocc.*, *Phosph.*, *Bry.*, *Sepia;* **of the ingesta** in particular, *Nux vom.*, *Ars.*, *Lyc.*, *Phosph.*, *Puls.*, *Cocc.*, *Calc.;* **complaints** from **flatulence** especially, *Nux vom.*, *China*, *Carbo veg.*, *Lyc.;* **constipation**, costiveness, *Nux vom.*, *Bry.*, *Lyc.*, *Sep.*, *Calc.;* **diarrhœa**, *Puls.*, *Ars.*, *Calc.;* **blind hæmorrhoids**, *Nux vom.*, *Sep.*, *Calc.*, *Ars.*, *Puls.*

## CHAPTER XIII.

## LIVER, SPLEEN AND DIAPHRAGM.

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### 1. Affections of the Liver.

1. **Acute hepatitis.**—In a case of this kind I always commence the treatment with *Acon.* 30th, of which I give every three hours a teaspoonful of a watery solution, which often cures the whole disease in a few days, or at least improves it so that the remaining symptoms will yield to *Bry.*, *Bell.* or *Merc.* If the improvement initiated by *Acon.* stops, I usually have recourse to *Bry.*, especially if the pains are like a stitching pressure, increased by the least motion; *Bell.* for aching pains, or a painful pressure, attended with violent rush of blood to the head, and *Merc.*, if the patient looks jaundiced, with bitter taste in the mouth and violent thirst. Beside these remedies *Cham.* and *Nux vom.* may sometimes render efficient service, *Nux vom.* especially for stinging pains with pressive headache, inability to bear the pressure of the clothes around the hypochondria, and great tendency to vomit; and *Cham.* if the disease is attended with attacks of anxiety, very bitter taste, and had its origin in a violent fit of anger and vexation. If, after previous mismanagement, the disease threatens to run a prolonged course, and *Nux vom.*, *Merc.* and *Bry.* remain ineffectual, *Lyc.* and no less *Sulph.* are excellent remedies in such a case, the latter especially if stinging pains still remain. If suppuration threatens, and *Laches.* does not remove this condition, *Ars.* may prove exceedingly effectual, especially if a quantity of black substance is evacuated by the rectum or mouth. If suppuration has actually set in and *Laches.* and *Hepar* do not help, *Silic.* and *Kali carb.* often prove effectual. If green-slimy diarrhœa supervenes, *Merc.* generally affords much better aid than *Puls.*

2. **Chronic liver-complaint.**—If of a rheumatic character, *Acon.* and *Bry.*, and sometimes *Bell.* and *Lyc.* render excellent

service. Of whatever nature chronic hepatitis may be, *Lyc.* is next to *Magnes. mur.*, *Bell.*, *Sulph.*, *Nux vom.* and *Calc.* one of the most excellent remedies which, in my hands, has procured the most positive improvement, especially in the case of arthritic persons, when all other remedies were without effect. If the liver is simply painful, without being perceptibly swollen, the following remedies often help beside *Lyc.*, *Bell.*, *Bry.*, *China*, *Nux vom.*, *Sulph.*, and if perceptibly swollen, *Calc.*, *China*, *Ars.*, *Laches.*, *Magnes. mur.*, *Nux vom.*, *Sulph.;* likewise, *Con.*, *Lyc.*, *Fer.* and *Kali carb.;* if the liver is indurated, especially, *Bell.*, *Bry.*, *Kali carb.*, *Magnes. mur.*, *Nux vom.* and *Sulph.* If these affections proceed from suppression of fever and ague, the remedies that afford the most help, are: *Ars.*, *Calc.*, *Sulph.*, and if attacking arthritic individuals or who are inclined to rheumatism, *Calc.* and *Lyc.* Chronic suppuration of the liver calls for, especially, *Laches.*, *Kali carb.* and *Silic.* (See below, No. 4.)

3. **Jaundice.**—In all recent cases of jaundice, if there is much fever, I commence the treatment with *Acon.*, after which I give *Merc.* If there is no fever, and the patient has borne the disorder for days and even weeks, I first give *China* for eight days, and, if this is not sufficient, *Merc.;* by pursuing this course I have cured a large number of cases of jaundice very rapidly, no matter whether they had originated in a cold or chagrin and vexation; those accompanied by fever got well in four or five days. In Chronic cases where neither *China* nor *Merc.* would help, I have had excellent results from *Sulph.*, *Nux vom.*, *Bell.* and *Sep.*, even from *Ars.*, but never from *Aurum*, *Digit.*, *Phosph.* and *Silic.* [In chronic jaundice, not much interfering with the general health, *Podophyllin*, middle attenuations, is an excellent remedy; *Digit.* is admirable in the worst forms of jaundice if the pulse is irregular and intermittent. H.]

4. **Special Indications** in liver-complaint.—The best remedies here are: *a*, if **complicated** with **vertigo**, *Bell.*, *Nux vom.*, *Silic.;* with much **headache**, *Bell.*, *Nux vom.*, *Sep.*, *Phosph.*, *Silic.;* with **loathing of food**, *Carbo veg.*, *Sulph.;* **nausea** and inclination to vomit, *Nux vom.;* **constipation**, *Acon. Bry.*, *Nux vom.*, *Calc.*, *Carbo veg.*, *Sulph.*, *Magnes. mur.;* **diarrhœa**, *Merc.*, *China*, *Ars.;* **cough**, *China*, *Phosph.*, *Sulph.;* **lassitude**, *Nux vom.*, *Sep.*, *Sulph.* Again:

*b*, for **burning** pains, *Merc.*, *Laches.*, *Ars.*, *Bry.;* for **aching,** dull pains, *Acon.*, *Bry.*, *Cham.*, *Carbo veg.*, *Sulph.*, *Cocc.*, *Lyc.*, *Merc.*, *Nux vom.;* for **ulcerative** pains and throbbing, *China*, *Silic.*, *Nux vom.;* for **swollen liver,** see No. 3; **hardness** of the liver, see the same; for **tearing** pains, *Merc.;* for **stinging,** lancing pains, *Acon.*, *Carbo veg.*, *Bry.*, *China*, *Cocc.*, *Lyc.*, *Merc.*, *Nux vom.*, *Sulph.*, *Sep.;* for a feeling of **weight** and fullness, *Carbo veg.*, *Nux vom.*, *Sulph.;* pains when **moving the chest,** *Acon.*, *Bry.*, *Bell.*, *Cocc.*, *Merc.*, *Nux vom.*

## 2. Affections of the Spleen, Diaphragm and Pancreas.

1. **Affections of the spleen.**—In inflammations of this organ the chief remedy is likewise *Acon.*, which often arrests the disease in a short time even if the patient vomits blood, or which at least modifies the disease so that *Arn.* will remove the rest. If nervous phenomena, such as lying in a stupid state, set in from the start, *Arn.* is at once the best remedy. If troublesome symptoms remain, they very often yield to *Ars.*, *China*, *Nux vom.* or *Bry.*, the two first named remedies being particularly indicated if the bloody discharges do not cease. In chronic splenitis *Ars.*, *Sulph.* and *Caps.*, generally prove the most efficient remedies, both if the spleen is simply very sensitive and likewise if it is swollen and indurated, particularly after fever and ague. The so-called splenetic stitches, splenodynia, are generally very readily cured by *Arn.*, [also by *Acon.* H.].

2. **Diaphragmitis.**—I have no experience regarding this disease; in a case of severe cardialgia, where the diaphragm was very much involved, I have derived speedy help from *Lyc.*, and in another case from *Cocc.*

3. **Inflammation of the pancreatic gland.**—Nor have I had a single case of this disease to treat under any form; in a case of allopathic mercurial poisoning I have met with the peculiar, profuse diarrhœa with discharges of a greenish and reddish water, a constant dull burning in the region of the pancreas and a sensation as if the evacuations proceeded from this locality. A cure was effected in this case by means of the *Iodide of Potassium* 12th, and *Carbo veg.* in the space of 8 to 10 days.

## CHAPTER XIV.

## AFFECTIONS OF THE ABDOMINAL ORGANS.

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### 1. Inflammations.

1. **Peritonitis.**—Here too the chief remedy at the outset is *Acon.* 30th, which sometimes removes both the fever and all danger in 30 to 36 hours, if given in teaspoonful doses of a watery solution of three globules every three hours. Afterwards *Bry.* is very often suitable in the case of men, or *Bell.* more particularly in the case of women. If, in difficult cases, neither of these remedies helps, *Merc.* still proves very efficient, especially if pus has already formed; in one case a single dose of *Merc.* 30th, two globules, effected the discharge of the pus by the anus in less than 24 hours. Sometimes, if *Merc.* does not improve the case, *Laches.* or *Lyc.* still helps, and if the abdomen becomes tumefied, *Rhus t.*

2. **Enteritis.**—Here too *Acon.*, *Bell.* and *Bry.* are the main remedies, especially if the smaller intestines are inflamed; in such a case *Coloc.* will likewise render good service. If the cœcum is inflamed, *Rhus t.* sometimes deserves a preference over *Bry.;* if *Rhus* should likewise fail us, *Laches.* may still prove very efficient; and, if the colon is inflamed, *Bell.*

3. **General remarks.**—If **watery exudations** set in, *Bry.* and *Sulph.* claim our first attention. For **suppuration,** *Merc.* or *Laches.;* if **gangrene** threatens, *Ars.* or *Laches.* If **typhoid symptoms** supervene during the course of such inflammations, and *Bell.* or *Rhus t.* does not help, *Hyosc.* will be found an efficient remedy.

4. **Chronic Inflammations.**—If abdominal inflammations become protracted, assuming a chronic character, *Sulph.*, *Calc.*, *Phosph.*, *Sep.*, *Lyc.*, *Carbo veg.*, *Laches.*, often help; for the Indications I refer below to No. 2, 8.

## 2. Colic.

1. **Flatulent colic.**—If setting in after flatulent food, the chief remedy is *China*, and, if this is not sufficient, *Puls.* or *Nux vom.* If the attack does not arise from this cause, *Bell.* often affords relief, especially if the transverse colon seems distended as if full of air, the pain is as if the bowels were clutched with the nails and dragged down, and the blood rushes to the head; or *Carbo veg.*, if the abdomen is distended unto bursting, the flatulence presses towards the chest and the patient belches up a good deal of wind; or *Cham.* if the flatulence becomes incarcerated here and there, as if it would force a passage, with distension of the epigastrium, stitches in the chest and great anxiety; *Cocc.*, if the flatulence becomes incarcerated under the ribs, with distension of the stomach, anxiety, emission of flatulence that does not afford any relief, relief by belching up wind; *Nux vom.*, if the flatulence is chiefly incarcerated in the hypochondria, or else presses upon the bladder and rectum, with inability to emit flatulence, and constipation; *Lyc.*, if partaking of the smallest quantity even of light food causes fullness and distension of the epigastrium, the bowels feeling as if containing nothing but wind, attended with violent pressure on the stomach; *Puls.*, for distension of the abdomen as if too full, with grumbling, but without emission of flatulence, sensation of weight in the bowels and as if the abdomen were bruised. [*Dioscorea villosa* is one of the most efficient remedies for this kind of colic. H.]

2. **Bilious colic.**—A chief remedy is *Cham.*, especially if the attack is caused by a fit of chagrin and anger, with tearing and twisting as if the bowels were rolled up in a big ball, nausea and bitter vomiting, or green-slimy diarrhœa; also *Coloc.* under similar circumstances, but with severe crampy pains; *Ars.*, if the violent crampy and constrictive pains in the abdomen are attended with vomiting of bile and mucus, and great prostration, with a disfigured and cadaverous countenance; *Cocc.*, if the cutting pains in the umbilical region become associated with spasmodic retraction of the abdomen, ineffectual retching, or vomiting of mucus and bile that affords no relief [*Acon.* and *Dioscorea* should not be forgotten in this form of colic; see the former paragraph, flatulent colic. H.]

3. **Hæmorrhoidal colic.**—What *Nux vom.* and *Sulph.* are capable of accomplishing in this particular, exceeds all imagination. Unless some other medicine is specially indicated, *Sulph.* is my first remedy. If the patient is at the same time troubled with flatulence, I give *Carbo veg.* and *Nux vom.*, and, if he is tormented by anxiety and restlessness, *Arsen.;* if this remedy should not be sufficient, *Nux vom.* will then often and speedily remove the last remnant of the trouble. If, after having commenced the treatment with *Carbo veg.*, symptoms remain that will not yield to this drug, I then have recourse to *Sulph.* with the best results.

4. **Rheumatic colic.**—For this colic *Bell.* as well as *Bry.* are indispensable remedies which I have often used with the best success even in the case of people who, although afflicted with gout, yet want to indulge their habitual liberal supply of food and drink and in whom the disease, in consequence of some gross error in diet, suddenly throws itself by a process of metastasis upon the abdominal viscera. Although *Nux v.* corresponds rather with purely rheumatic conditions, yet it may likewise be suitable where a tearing distress in the head and extremities is associated with violent cardialgia and colic, ineffectual urging to stool and vomiting of the ingesta, with sour taste in the mouth. If *Nux v.* does not relieve these symptoms, *Cocc.* may prove very useful. If the pains are very violent so as to extort cries from the patient and to drive him beside himself for pain and agony, *Coloc.* often affords very speedy help.

5. Nervous **spasmodic colic.**—If the attacks recur periodically, the most efficient remedy is undoubtedly *Coloc.*, which cures at least nine-tenths of such attacks more certainly than any other remedy, especially if the pains are most violent at a small spot in the umbilical region, with violent digging and crampy pains extorting cries and sometimes abating for a few minutes in order to return again with redoubled violence. If *Coloc.* does not afford complete relief, *Bell.* will then often be found suitable, especially if the colic is seated rather below the umbilicus, with a sensation as if the patient were clutched and pinched with nails in that region; or if the flatulence seems to be incarcerated by the spasm, giving rise to a distension of the transverse colon as if full of gas. Likewise in some cases *Nux v.*, and not less *Sulph.*, *Lyc.*, *Cocc.* or *Ignat.*,

the three last named remedies very often in the case of hysteric females, even between the menstrual periods.

6. **Menstrual Colic.**—The chief remedy here always is *Cocc.* which sometimes affords relief by mere olfaction, especially if the menses flow too scantily or even remain entirely suppressed. Likewise *Cham.*, if the pain is like a bearing-down pain from the small of the back; or *Puls.*, if the pain is more like a pressure on the rectum, with a heavy feeling in the abdomen as from a stone; likewise *Bell.* if the pressure bears heavily upon the womb as if this organ would fall out; finally *Nux vom.* if there is nausea, with a pain as from a strain, and cramps deep in the groin. If the patients are driven beside themselves for pain, with a good deal of screaming and crying, *Coff.* helps sometimes. [*Helonias* and *Caulophyllin* are, among the recent additions to our Materia Medica, the most distinguished remedies for menstrual colic. H.]

7. **Colic from metallic poisoning.**—In painters' colic I have so far accomplished most by means of *Cham.*, *Alum.* and *Plat.;* in some cases likewise with *Bell.* The copper-colic of workers in verdigris yields most reliably to *Hep.* and *Arsen.*, sometimes likewise to *Verat. alb.*

8. **Special Indications** for the remedies for colic.—*a*, if the colic is caused by a fit of **vexation,** principally, *Cham.* or *Coloc.*, sometimes also *Nux vom.;* after **taking cold,** chiefly, *Cham.*, *Carbo veg.*, *Coloc.*, *Merc.*, *Puls.;* after **derangement** of **the stomach,** very often, *Puls.*, *Carbo veg.*, *Nux vom.*, *Phosph.* or *Coloc.;* after excessive use of **coffee,** most generally, *Cham.* or *Nux vom.*, and likewise often *Cocc.*, *Coloc.*, even *Bell.* and *Merc.;* after **suppression of hæmorrhoids,** *Nux vom.*, *Sulph.* or *Arsen.;* after **abuse of chamomile,** very frequently, *Puls.* or *Ignat.*, likewise *Nux vom.;* **after** taking **rhubarb** or magnesia, most generally, *Cham.*, *Puls.* or *Coloc.;* in the case of **females** particularly, *Bell.*, *Cocc.*, *Ignat.*, *Puls.*, *Lyc.*, [also *Helonias* and *Caulophyllin.* H.] *b*, for **burning** pains, *Arsen.*, *Carbo veg.*, *Verat. alb.*, *Phosph.*, *Cocc.*, *Nux vom.;* for **twisting** and digging pains, *Lyc.*, *Nux vom.*, *Arsen.*, *Bell.*, *Cham.*, *Coloc.*, *Verat. alb.;* for **aching** pains, *Carbo veg.*, *Cham.*, *Cocc.*, *Bell.*, *China*, *Phosph.*, *Coloc.*, *Nux vom.*, *Puls.*, *Sulph.*, *Verat. alb.;* for **griping** and clutching pains, *Coloc.*, *Puls.*, *Cocc.*, *Bell.;* as if **clutched** with nails, *Bell.;*

for crampy and constrictive colic, *Cocc.*, *Coloc.*, *Nux v.*, *Lyc.*, *Ars.*, *Verat. alb.*, *Cham.*, *Bell.*, *Puls.;* as if rolled up like a ball, *Cham.;* for tearing pains, *Cocc.*, *Coloc.*, *Cham.*, *Ars.*, *Phosph.*, *Lyc.*, *Nux v.*, *Puls.;* for cutting pains in the abdomen, *Coloc.*, *Cocc.*, *Carbo veg.*, *Ars.*, *Merc.*, *Puls.*, *Verat. alb.*, *Nux v.*, *Lyc.;* for **stinging,** lancing pains, *Lyc.*, *Nux v.*, *Phosph.*, *Bry.*, *Cham.*, *Sulph.;* for **tension** in the abdomen, *China*, *Cocc.*, *Coloc.*, *Nux v.*, *Lyc.*, *Carbo veg.*, *Puls.*, *Verat. alb.*, *Staphys.;* as if **pulled down** in the abdomen, *Bell.*, *Bry.;* for a pain **as if sore,** especially, *Bell.*, *Nux v.*, *Ars.*, *Ign.* *c*, if the pains attack more particularly the **epigastrium,** *Nux v.*, *China*, *Carbo veg.*, *Cham.*, *Cocc.*, *Lyc.*, *Verat. alb.*, *Puls.;* the **sides** especially, *Cocc.*, *Carbo veg.*, *Coloc.*, *Sulph.;* **left** side especially, *Coloc.*, *Sulph.;* especially the **hypogastrium,** *Bell.*, *Nux vom.*, *Bry.*, *Lyc.*, *Phosph.*, *Carbo veg.;* especially the **umbilical region,** *Bell.*, *Bry.*, *China*, *Coloc.*, *Ars.*, *Cham.*, *Cocc.*, *Lyc.*, *Nux v.*, *Puls.*, *Veratr. alb.;* the region of the **bladder,** *Nux vom.*, *Carbo veg.*; the **pubic region,** *Bell.*, *Nux vom.*, *Cham.* [*Caulophyllin*, *Helonin*, H.] *d*, if **complicated** with frequent **eructations,** *Bell.*, *Carbo veg.*, *Coloc.*, *Lyc.*, *Bry.*, *Nux vom.;* with a good deal of **nausea** and inclination to vomit, *Arsen.*, *Cocc.*, *Cham.*, *Coloc.*, *Nux vom.*, *Puls.*, *Lyc.*, *Verat. alb.;* **vomiting,** *Ars.*, *Verat. alb.*, *Cocc.*, *Nux vom.*, *Cham.*, *Puls.*, *Coloc.*, *Lyc.;* **distension** of the **abdomen,** *Carbo veg.*, *China*, *Bell.*, *Cocc.*, *Coloc.*, *Lyc.*, *Ars.*, *Phosph.*, *Nux vom.*, *Puls.*, *Verat. alb.*, *Sulph.;* as if distended **with gas,** partially, *Bell.*, *Lyc.*, *Cocc.;* **tympanitic,** *China*, *Carbo veg.*, *Nux vom.*, *Sulph.;* **retraction** of the **abdomen,** *Ars.*, *Lyc.*, *Puls.*, *Cocc.;* **incarcerated flatulence,** *Nux vom.*, *Carbo veg. Lyc.*, *Verat. alb.*, *Cham.*, *Cocc.*, *Phosph.*, *Puls.;* **constipation,** *Bry.*, *Nux vom.*, *Lyc.*, *Arsen.*, *Carbo. veg.*, *Cocc.*, *Coloc.*, *Verat. alb.*, *Sulph.;* **diarrhœa,** *Puls.*, *Cham.*, *Coloc.*, *Merc.;* **noisy flatulence** during the pains, *Bell.*, *Bry.*, *Carbo veg.*, *China*, *Verat. alb.*, *Phosph.*, *Puls.*, *Sulph.;* much **vertigo,** *Bell.*, *Nux vom.*, *Lyc.*, *Phosph.;* **rush of blood** to the head, *Bell.*, *Nux vom.*, *Sulph.;* **pale face,** *Nux vom.*, *Ars.*, *Cocc.*, *Lyc.*, *Puls.;* **yellowness of the face,** *Cocc.*, *Cham.*, *Nux v.;* **urine diminished,** *Nux vom.*, *Lyc.*, *Bry.;* **copious urine,** *Verat. alb.*, *Bell.;* **oppressed breathing,** *Carbo veg.*, *Puls.*, *China*, *Sulph.*, *Lyc.*, *Nux vom.*, *Ars.*, *Verat. alb.;* **backache** and pain in the small of the back, *Nux v.*, *Puls.*, *Sulph.*, *Cham.*, *Lyc.*, *Bell.*, *Coloc.;* **chilliness,** *Puls.*, *Arsen.*, *Merc.*, *Carbo veg.;* **coldness** of the body and extremities, *Verat. alb.*, *Ars.*, *Nux v.*, *Coloc.;* **cold sweat,** *Verat. alb.*, *Ars.*, *Bell.*, *Coloc.;* **heat** of the body, *Carbo veg.*, *Arsen.*, *Coloc.;* great

weakness and syncope, *Verat. alb.*, *Ars.*, *Carbo veg.*, *Coloc.;* anxiety and restlessness, *Carbo veg.*, *Ars.*, *Verat. alb.*, *Phosph.*, *Cham.*, *Coloc.*, *Cocc.*, *Lyc.; e*, if the pains occur more particularly in the evening, *Puls.*, *Bell.;* if especially early in the morning, *Nux vom.*, *Phosph.*, *Hyosc.*, *Cham.;* at sunrise, *Cham.;* if particularly at night, *Ars.*, *Bell.*, *China*, *Cham.*, *Puls.*, *Sulph.*, *Rhus t.*, *Nux v.;* after midnight, *Cocc.*, *Puls.*, *Phosph.;* aggravated by contact and pressing on the parts, *Bell.*, *Carbo veg.*, *Lyc.*, *Cocc.*, *Coloc.*, *Nux v.*, *Ars.*, *Hyosc.*, *Phosph.*, *Puls.*, *Rhus t.*, *Sulph.;* worse when rising from a recumbent position, *Coloc.;* worse when treading, *Nux vom.*, *Bry.;* worse in a recumbent posture, *Phosph.*, *Lyc.*, *Puls.;* when lying on the back or side, *Lyc.;* by eating even the lightest kind of food, *Carbo veg.*, *Lyc.*, *Verat. alb.;* especially fruit, *Verat. alb.;* sour food, *Carbo veg.;* flatulent food, *China*, *Lyc.*, *Bry.*, *Verat. alb.;* by exercise generally, *Puls.*, *Nux vom.; f*, if improved by eructations, *Cocc.*, *Lyc.;* after emission of flatulence, more particularly, *Carbo veg.*, *China*, *Verat. alb.*, *Bell.*, *Nux v.;* when pressing upon the part, *Bell.*, *Coloc.*, in a lying posture, sitting, *Nux vom..;* when lying on the abdomen, especially, *Calc.*, *Coloc.*, *Phosph.;* when bending backwards, especially, *Bell.*, *Nux vom.*, *Sulph.;* when doubling up the body, *Sulph.*, *Nux v.*

### 3. Hernia and Intussusception of the Bowels.

1. **Intussusception of the bowels,** miserere, volvulus, ileus.—If there is no inflammatory fever in these cases, some of which I have had to treat, and a frightful colic and a complete obstruction of the intestinal canal, which admits neither of the passage of fæcal matter nor flatulence, is associated with vomiting of fæces, I commence the treatment, if the stricture is spasmodic rather than inflammatory, with *Bell.;* but if the inflammatory symptoms prevail, with *Bry.*, which has acted very well in my hands in the very first cases that presented themselves for treatment. If none of these remedies improve the case to any great extent within 24 hours, I then give *Nux v.*, and if this should likewise prove ineffectual, I then give *Sulph.*, with which I generally accomplish my purpose. If there is much fever, I give *Acon.* which by subduing the inflammation, likewise brings about a voluntary relaxation of the stricture. If, after the fever is moder-

ated, symptoms of intussusception still remain for which neither *Bry.*, *Nux v.*, nor *Sulph.* is capable of affording any relief, I have recourse to *Bell.* or *Arsen.*, which last-named remedy once saved the life of a young man, one of my patients, in whom all the signs of threatening gangrene had already set in. In two cases of a purely spasmodic stricture where no vomiting had yet taken place and the intestinal canal was already completely closed, with a sensation of spasmodic constriction and frequent shocks in the affected locality as if some live body would push out there, *Thuja* has rendered efficient and speedy relief, whereas I have never seen any great effect from either *Opium* or *Plumbum* in such cases; this is probably owing to the circumstance that a constipation where these remedies are so characteristically indicated, neither depends upon spasm nor inflammation, but solely upon a paralytic torpor of the intestinal canal. [Other homœopathic practitioners have reported fine cures of ileus by means of Opium-injections as well as the internal use of this drug. H.] A case of fæcal vomiting which set in after a fall on the head in the case of a boy ten years old, and where no trace of swelling in the bowels could be perceived and not a sign of colic was complained of, with a stupid feeling in the head, was speedily relieved by one dose of *Sulph.* 30th, three globules. In all these cases I gave the medicine in form of a watery solution, three globules of the 30th attenuation, a teaspoonful every two or three hours, and if the remedy was truly homœopathic, signs of improvement manifest themselves very rapidly.

2. **Hernia.**—In cases of strangulation, with violent inflammation, burning of the affected part, bitter eructations and great anxiety, a watery solution of *Acon.* 30th, three globules, in teaspoonful doses every hour, generally affords speedy relief, and frequently removes all danger in a few hours, after which the remaining symptoms often yield to *Sulph.*, or, if this has no effect, to *Lyc.* or *Nux vom.* If the inflammation is not very violent, *Bell.* is the best remedy, and no less *Nux vom.;* and, if the strangulation is attended with much flatulence, *Cocc.* or *Lyc.* If symptoms of mortification threaten, *Arsen.* is undoubtedly the best remedy. Moreover we may derive eminent service from *Cocc.*, *Lyc.*, *Nux v.*, *Bell.*, *Sulph.* in strangulated inguinal hernia; from *Nux vom.* and *Calc.* in strangulated scrotal hernia; from *Nux v.*, *Bell.*, *Lyc.* in

strangulated femoral hernia; from *Nux v.* and *Sulph.* in umbilical hernia. Ordinary hernia, if not too old, sometimes heals quite nicely by the use of *Cocc.*, *Nux v.*, *Sulph.* and *Aurum.*

### 4. Worms, helminthiasis.

1. **Worm-complaints** generally.—If they cause fever, not only in the case of children but likewise in the case of adults, the best remedy in such cases is likewise *Acon.*, and not unfrequently *Merc.*, *Cina*, even *Silic.*, and, if convulsions supervene, *Cicuta.* If spasms set in, not only *Cicuta* may afford relief, but *Bell.*, *Cina* or even *Ignat.* If the brain is disturbed, with sopor etc., *Bell.* or *Cina* may be given; for much spitting, waterbrash, *Acon.*, *Lyc.*, *Silic.;* for constant rising in the throat and stomach, *Acon.*, *Spig.;* for tendency to vomit and vomiting, *Acon.*, *Cina*, *Lyc.*, *Spig.;* for a crawling sensation in the stomach, *Lyc.;* for colic, *Acon.*, *Cina*, *Lyc.*, *Merc.;* for diarrhœa, *Calc.*, *Cina*, *Merc.*, *Spig.*

2. **Ascarides, pinworms.**—*Acon.*, *Sulph.*, *Merc.* and *Cina* hold the first rank both in removing the disorders caused by these worms and in finally extirpating the animalcules, for which purpose *Merc.* and *Sulph.*, frequently repeated, are the chief remedies. *Calc.*, which must be allowed to act a long time and had better be preceded by *Sulph.*, is an indispensable remedy.

3. **Lumbrici.**—After *Cina*, and still more perhaps after *Acon.*, I have often seen tolerably large lumbrici not only discharged by the anus, but likewise by the mouth. *Cicuta* may likewise be administered with good results, if the patient complains of violent pains in the occiput and nape of the neck, with occasional paroxysms of indistinct vision and vanishing of sight; likewise *Calc.* if the patient complains of constant headache with abdominal distension; or *Spig.*, if the patient is tormented by canine hunger, with morning-nausea, rising from the stomach to the pharynx, (in which case I have likewise seen a large lumbricus discharged by the mouth, with alleviation of all the symptoms), frequent paroxysms of colicky pinching and diarrhœa.

4. **Tænia.**—If all the remedies whose physiological symptoms

as well as clinical indications point to expulsion of tænia, had it in their power to cause the disappearance of this animal, we should certainly not be destitute of triumphant arms. Unfortunately we may labor with most of these remedies, more particularly, *Argen.*, *Fragaria*, *Phosph.*, *Punica granatum*, *Sabad.*, *Stann.*, until we get tired, without accomplishing the least result, unless we mean to regard as homœopathic cures the expulsions of tænia with Punica Granatum, that have been smuggled into Rueckert under the homœopathic flag. That heroic remedies are sometimes resorted to, is in accordance with human weakness; what we ought to learn is to place the intestinal canal in such perfect conditions of health that no foreign parasite can live in it, but must necessarily perish by starvation. So far this art does not yet seem to have been attained. Only in the case of three children who had formerly discharged pieces of tænia, I have so far been able to hush up all their former complaints by means of *Sulph.*, *Calc.* and *Lyc.*, given in this order at long intervals, and for a number of years during which I had opportunities of observing them, I have never seen a symptom of tænia, so that the father of one of these children told me one day, that his boy's tænia had probably "been digested" during the treatment. In the case of adults I have never been able to accomplish such results, whether because children are made to observe a stricter diet, or from other causes, I am unable to say. It is certain, however, that Hahnemann was perfectly right in recommending *Felix mas.* for the disorders occasioned by tænia. On the other hand I have never been able to substantiate in my own practice the correctness of Hering's statement, who is generally a very accurate observer, to give two doses of *Sulph.* during a declining moon, and the next time a dose of *Merc.* [*Kousso* is often used with good effect for the expulsion of tænia; for the mode of using it see Hempel's Materia Medica. H.]

## CHAPTER XV.

## MORBID EVACUATIONS FROM THE BOWELS AND AFFECTIONS OF THE RECTUM.

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### 1. Simple Diarrhœa.

Among the disturbances of the normal organism that a homœopathic physician is called upon to treat, not one is probably more easily managed and at the same time presents greater difficulties than a *simple diarrhœa.* None more easily, because, if the right remedy is given, two globules of the 30th attenuation, dry on the tongue, are perfectly sufficient to arrest at once the most profuse evacuations; and, on the other hand, none more difficult, because, if no sure indications exist either as regards the exciting cause or the quality of the evacuations, as very often happens in the case of simple, more or less watery and painless, brown diarrhœic stools of accidental origin, we have often to seek a long time before the suitable remedy is found. For such accidental attacks of diarrhœa without any definite indications I select according to the best of my knowledge and belief, from among the remedies that cure most kinds of diarrhœa, such as: *Ipecac.*, *Verat. alb.*, *Phosph.*, *Arsen.*; *Puls.*, etc., and, if one remedy does not help, I give, according to circumstances, another remedy in 6, 12 or 24 hours, and if no remedy cures, I then have recourse to *Sulph.*, which often achieves the most brilliant and rapid results. Fortunately not every kind of diarrhœa is of the above-mentioned kind, and, if we only keep a few leading points in view, we shall in most cases hit upon the right remedy in our first selection. In order to fix these leading points it may not be inexpedient to classify the different kinds of diarrhœa seriatim, although not in a strictly logical order in accordance with one single principle, but so as to present to the beginner a sort of guide in every case.

1. **Gastric** diarrhœa occasioned by a weak or deranged

stomach.—Here the best remedies are: *Puls.*, *Ipec.* or *Arsen.*, *Rhus t.*, *Sec.*, *Bry.*, *Dulc.*, *Sulph.*; *Puls.*, if the discharges are papescent, with a sense of loathing, nausea, offensive eructations, colic, the evacuations occurring mostly at night, especially if the stomach was chilled by fruit or ice; *Arsen.*, under the same circumstances, if the evacuations are rather watery, with burning and cutting in the bowels; *Ipec.*, if there is a good deal of nausea or even vomiting, or if the discharges are thin, like yeast, very fetid; *Bry.*, especially if the diarrhœa takes place after every meal, or after drinking, with nausea, the evacuations are more or less undigested, especially in hot summer-weather, after eating fruit, or taking a cold drink, or after too copious a meal generally; *Rhus t.*, for fæcal diarrhœa with colic that ceases after the evacuation; *Ant. cr.*, for rather watery diarrhœa with deranged stomach, white or yellow-coated tongue, eructations tasting of the ingesta, nausea and aversion to food; *Dulc.*, if the patient complains greatly of nausea and vomiting, with violent thirst, the stools are of a watery, slimy consistence, and occasionally mixed with undigested food, especially in hot summer-weather; *Rheum*, for sour-smelling stools, like yeast, as under *Ipec.*, flow of saliva and pale face; *Nux v.*, if the stomach is deranged and mere mucus is passed in small quantities, attended with colicky pains that pass from below upwards and cause nausea, every evacuation being succeeded by great nervousness and exhaustion, with sour taste in the mouth after drinking milk; *China*, if the digestive organs have been weakened by losses of fluids, with undigested evacuations, likewise after drinking bad water, the discharges being thin and of a brownish color, with spasmodic pains in the bowels, flatulence and eructations; *Sulph.*, very frequently if none of the above-mentioned remedies help, and the diarrhœa threatens to become chronic. Beside these remedies the following sometimes help, *Merc.*, *Bell.*, *Cham.*, *Verat. alb.*, *Calc.*, provided the special indications given below are adapted to their therapeutic range.

2. **Bilious** diarrhœa.—This diarrhœa, when occurring after a fit of chagrin, as it often does, is often promptly arrested by *Cham.*, especially if the evacuations are green, watery, hot, fetid, with a bitter taste in the mouth, bitter eructations and vomiting of bile; if *Cham.* is not sufficient, *Bry.* will help in most cases; or if the colic is very severe, *Staphys.* or *Coloc.* If bilious diarrhœa is oc-

casioned by a cold and the above-mentioned remedies do not help, *Dulc.*, *Merc.*, *Puls.* or *Sulph.*, and in chronic cases *Calc.* and *Phosph.* may prove useful.

3. **Inflammatory** diarrhœa.—For inflammatory diarrhœa, which often resembles the fall-dysentery and is most commonly of a rheumatic nature, *Merc.* is the chief remedy, especially if the diarrhœa is accompanied by severe cutting colicky pains, with ineffectual urging to stool, green, watery, mucus and even bloody discharges, and sometimes vomiting; *Dulc.*, if *Merc.* fails, the diarrhœa occurs more in the summer than fall, and particularly at night, with severe cutting in the umbilical region; *Ipecac.*, if the diarrhœa is complicated with colicky pains and the patient screams and tosses about, with small and bloody mucus stools, or yellow, fetid, yeasty evacuations, great debility, disposition to lie down, pallid countenance and blue margins around the eyes; *Nux vom.*, if the discharges are scanty, consisting of mucus and blood, with a good deal of flatulence, cutting in the umbilical region during stool, ineffectual urging and prostration; *Arsen.*, if the evacuations are very copious and set in particularly after midnight; they consist of a small quantity of mucus or are watery, with violent colic or burning around the umbilicus before, during or after the evacuations, burning at the anus during stool, extreme prostration even unto syncope, rapid emaciation, disfigured and pallid countenance and cold perspiration. Sometimes *Coloc.* helps here, the patient complaining of colic as if the bowels were squeezed between stones, with evacuations of bloody mucus and tympanitic distension of the abdomen; or *Secale*, if the cutting pains flash through the bowels like lightning, followed by watery evacuations coming on by fits and starts. If not one of these remedies helps and the diarrhœa threatens to hold on four, five days and longer, *Sulph.* will assist in rapidly removing the remaining symptoms. [In this diarrhœa, with watery, inodorous or foul-smelling evacuations, attended with creeping chills, dryness of the mouth, foul or insipid taste, coated tongue, headache, vertigo, nausea, heat in the bowels, *Acon.* will be found an excellent remedy. These symptoms might likewise be construed as a group of symptoms denoting bilious diarrhœa. H.]

4. **Simple mucous diarrhœa,** not inflammatory, but

rather painless, of a catarrhal nature.—*Puls.* helps in many cases of this kind, especially if the evacuations change their color at every discharge; *Dulc.*, if the diarrhœa sets in at night and is painless; *Sulph.*, for acrid diarrhœa excoriating the parts around the anus, or if every fresh cold causes another attack of diarrhœa. If the discharges are exhausting, *Coloc.* helps sometimes; or *Ipec.*, if the discharges are like yeast, fermented and badly-smelling; or *Cham.*, if the discharges consist of a yellow, white or green mucus, with colic and flatulence; likewise *Secale*, with slimy coating of the tongue, slimy taste, and painless, yellow diarrhœa. If the discharges become painful, with more or less tenesmus, *Merc.* will often be found suitable, especially if the evacuations occur principally at night; or *Nux v.*, if the evacuations occur more particularly early in the morning after breakfast. *Rheum* is indicated if the mucous passages have a sour smell, in which case *Cham.* will sometimes help. For painless mucous diarrhœa, *Phosph.*, *Ferr.*, *Arsen.*, *Petrol.* and *Calc.* are sometimes useful, if in accord with the special indications given below.

5. **Watery** diarrhœa.—This form of diarrhœa which is generally caused by getting the feet or abdomen chilled, and is of a catarrhal, rheumatic or epidemic character, finds its principal remedy during summer in *Bry.* or *Dulc.* [also tincture of Aconite-root, first decimal atten. H.], and during the cold season in *Verat. alb.*, especially if the discharges have a brown color. If the discharges are painless, or else excoriate the anus, with spasmodic pains in the anus and back, *Fer.* often helps, and, if complicated with flatulence and spasmodic colic, and the stools are brown, *China. Cham.* likewise often renders excellent service if the stools are either green or yellow, with tearing or cutting in the abdomen and burning-smarting evacuations spirting out with great force and a good deal of wind. If these kinds of diarrhœa become chronic. *Phosph. ac.*, *Calc.* and *Secale* may cure them.

6. **Summer-diarrhœa,** summer-complaint. — Although some physicians profess to have effected rapid cures of this disease by means of *Verat.*, yet I must confess that although this remedy has been of paramount use to me in the premonitory diarrhœa of cholera, if it happened to set in in the summer-season, it has shown itself much less effective in the ordinary summer-complaint than

*Bry.* and *Phosph. ac.*, and not unfrequently *Dulc.* and *Ant. cr.*; *Bry.* more particularly if the diarrhœa is caused by cold drinks, new beer, fruit or getting chilled on hot days, and if the discharges are mixed with a good deal of undigested food; *Dulc.*, if the evacuations are more particularly frequent at night, either watery and quite painless, or attended with violent colicky pains and, in such a case, very slimy; *Antim. cr.*, if the diarrhœa is accompanied by a good deal of nausea, with eructations tasting of the ingesta, and coated tongue. If *Bry.* is not sufficient, *Carbo veg.* will be found of much use; likewise *Ipecac.*, if the discharges are numerous, small, yellow, with pains in the rectum; or *China*, if the discharges take place soon after eating, with undigested food; or *Arsen.* as well as *Nux vom.*, if the patients are very languid; and finally *Secale*, for painless yellow and watery stools, spirting out with great force, containing occasionally undigested food, like *Bry.*, *Dulc.* and *China*, and leaving the patient weak after every discharge; *Phosph. ac.*, is perfectly certain to cure the case, if every one of the above-mentioned remedies should fail.

7. **Diarrhœa** of children, summer-complaint of children.—One of the most efficient remedies for the diarrhœa of children is: *Ipecac.*, especially if the children cry a good deal and toss about, the bowels are distended and the discharges are frequent and small, yellow, fermented like yeast; next *Rheum*, if the fermented or frothy evacuations have a sour smell, the face is pale and the children drivel and cry a good deal; *Cham.*, if the children's faces incline to flush, the little patients are peevish and refractory, want to be carried all the time, the stools are frequent and watery, brown or consisting of green mucus, smell sour or like rotten eggs and sometimes contain undigested food; *Secale*, especially in the case of over-fed children, if the discharges contain a good deal of undigested matter and *China* does not improve this condition; *Fer.*, likewise for discharges containing undigested food, watery, the children look pale and suffering; *Arsen.*, if the discharges spirt out suddenly in one jet, they are watery, brown, prostrate the little patients, who are reduced to skin and bones; *Sulph.*, in the case of atrophied children with hard and distended bowels, if *Ars.* is insufficient, or if not one of the above-mentioned remedies seems capable of arresting the diarrhœa; *Calc.*, likewise for chronic diarrhœa, especially if even *Sulph.* proves ineffectual, but more

particularly for discharges having a cadaverous smell, at times of a greenish and then of a grayish color, attended with sudden emaciation like marasmus. Diarrhœa setting in during dentition generally requires *Merc.*, *Sulph.* or sometimes *Ipecac.*, *Cham.* or *Arsen.* [*Iris versicolor* or the blue-flag has been found highly efficient in summer-complaint. H.]

8. **Various kinds of abdominal discharges,** lienteria, hepatic flux, cœliac flux.—Lienteria, when the food generally passes off undigested, yields in most cases of recent origin to one or two doses of *China* 30th, three globules; in more protracted cases, if *China* does not reach the case, *Sulph.*, *Calc.* and *Phosph.*, and likewise *Merc.* and *Fer.* are of great use. In hepatic flux I have had an opportunity of testing the curative power of *Petrol.* recommended by Lobethal, in two cases, and in cœliac flux I have found *Calc.* recommended by Schelling, and *Sulph.* efficient.

9. **Chronic diarrhœa.**—Unless other remedies are specially indicated, my chief remedy in this complaint is *Sulph.*, after which, according to circumstances, I give *Calc.*, *Phosph.* or *Petrol.*, more especially if the patient had been for some time under homœopathic treatment, and had taken all kinds of medicine, except the above-mentioned three remedies. If the symptoms indicate any one of the remedies mentioned from Nos. 1 to 8, and the patient had not yet taken this remedy, I commence the treatment with this medicine, after which, if it should prove ineffectual, I have recourse to *Sulph.*, *Calc.* etc. Moreover, in the case of phthisicky patients, special attention may be given to *Fer.* and *Phosph.;* for suppuration of the bowels to *Sulph.* and *Calc.;* after typhus, generally, *Phosph.;* after cholera, principally, *Secale*, *Phosph.*, *Phosph. ac.*, *Sulph.*

10. **Special Indications** for the remedies for simple diarrhœa.—The following are specially indicated: *a*, after a **cold,** *Bry.*, *Merc.*, *Dulc.*, *China*, *Verat. alb.*, *Nux vom.*, *Cham.*, *Ipec.*, *Ant. cr.*, *Sulph.;* especially after a **cold drink,** *Bry.*, *China*, *Carbo veg.*, *Arsen.;* especially after **deranging the stomach,** *Puls.*, *Ant. cr.*, *Bry.*, *Nux vom.*, *Arsen.*, *Carbo veg.*, *Ipec.*, *Sulph.;* after **milk,** especially, *Lyc.*, *Bry.*, *Sulph.;* after **fruit,** *Puls.*, *Bry.*, *Arsen.;* after **acids,** *Bry.*, *Ant. cr.*, *Nux vom.;* after a **debauch,** *Bry.*, *Ant. cr.*, *Nux v.*, *Ipec.*, *Carbo veg.;* in the case of **old people,** *Sec.*, *Phosph.*, *Sulph.*, *Ant. cr.*,

*Bry.*, *Arsen.*, *Nux vom.*, and if the diarrhœa **changes** about **with constipation**, *Ant. cr.*, *Phosph.*, *Sulph.*, *Bry.*, *Nux vom.;* after a fit of **chagrin**, *Cham.*, *Coloc.;* after a **fright** and an attack of fear, *Verat. alb.* after **grief** and sorrow, *Phosph. ac. b*, for **fæcal** diarrhœa, *Puls.*, *Rheum*, *Sulph.*, *Rhus t.*, *Merc.*, *Nux v.;* having a **cadaverous smell**, *Carbo veg.*, *Calc.;* smelling like **rotten eggs**, *Cham.;* very **fetid, in general**, *Carbo veg.*, *Bry.*, *China*, *Ars.*, *Ipec.*, *Cham.*, *Merc.*, *Puls.*, *Sulph.;* **sour** smelling, *Rheum*, *Calc.*, *Cham.*, *Sulph.;* consisting of a **bloody mucus**, *Merc.*, *Dulc.*, *Ipec.*, *Sulph.*, *Nux vom.*, *Arsen.*, *Puls.*, *Rhus t.;* **papescent**, *Puls.*, *Rheum*, *Ipec.*, *Sulph.*, *Phosph.*, *China*, *Calc.;* **purulent**, *Bell.*, *Sulph.*, *Calc.*, *Merc.;* **like jelly**, especially, *Rhus t.*, *Dulc.*, *Calc.;* like **yeast** as if fermented, *Ipec.*, *Rheum*, *Sulph.;* like **stirred eggs**, *Puls.*, *Rhus t.*, *Merc.*, *Calc.;* **acrid**, excoriating, *Sulph.*, *Arsen.*, *Merc.*, *Fer.*, *China*, *Cham.;* **slimy**, papescent, *Puls.*, *Sulph.*, *Merc.*, *Dulc.*, *China*, *Bell.*, *Cham.*, *Phosph.;* containing **undigested** food, *China*, *Bry.*, *Dulc.*, *Merc.*, *Calc.*, *Phosph.*, *Sulph.*, *Fer.*, *Cham.*, *Secale;* **watery**, *Cham.*, *Dulc.*, *Fer.*, *Sec.*, *Verat. alb.*, *Ant. cr.*, *Arsen.*, *Calc.*, *Merc.*, *Phosph. ac.*, *China*, *Puls.*, *Nux vom.*, *Phosph.*, *Sulph.;* **brown**, especially, *Arsen.*, *Bry.*, *China*, *Verat. alb.*, *Dulc.*, *Ipec.*, *Sulph.*, *Sec.*, *Cham.*, *Calc.*, *Fer.*, *Merc.;* **yellow**, *Ipec.*, *Cham.*, *Dulc.*, *China*, *Calc.*, *Ars.;* **green**, *Puls.*, *Cham.*, *Merc.*, *Dulc.*, *Arsen.*, *Verat. alb.*, *Calc.*, *Sec.*, *Sulph.;* **spirting out**, *Verat. alb.*, *Ipec.*, *Bry.*, *Dulc.*, *Fer.*, *Phosph.*, *Sec.*, *Sulph.*, *Arsen. c*, if accompanied by a good deal of **eructation**, *China*, *Bry.*, *Ant. cr.*, *Cham.*, *Dulc.*, *Ars.*, *Puls.;* **nausea**, inclination to vomit, *Ipec.*, *Bry.*, *Ant. cr.*, *Verat. alb.*, *Cham.*, *Ars.*, *Merc.*, *Carbo veg.;* **vomiting**, especially, *Dulc.*, *Ipec.*, *Verat. alb.*, *Merc.*, *Cham.*, *Ars.*, *Puls.*, *Rheum*, *Sec.*, *Sulph.;* **thirst** increased, *Dulc.*, *Ars.;* with **colic**, *Merc.*, *Cham.*, *Puls.*, *Rheum*, *Nux vom.*, *Coloc.*, *Rhus t.*, *Bry.*, *Ars.*, *Ant. cr.*, *Dulc.*, *Sulph.*, *Verat. alb.;* colic only **before** stool, *Rhus t.;* **without pain**, *Fer.*, *Verat. alb.*, *Dulc.*, *Phosph. ac.*, *China*, *Arsen.*, *Puls.*, *Sulph.;* a good deal of **tenesmus** in the anus, *Merc.*, *Nux vom.*, *Sulph.*, *Arsen.*, *Rheum*, *Ipec.*, *Rhus t.;* **burning** in the anus, *Ars.*, *Merc.*, *Cham.*, *Dulc.*, *China*, *Puls.*, *Sulph.;* great **weakness** and prostration, *Ars.*, *Calc.*, *Sec.*, *Nux vom.*, *Ipec.*, *China*, *Fer.*, *Phosph.;* sudden **emaciation**, *Arsen.*, *Calc.*, *Merc.*, *Dulc.*, *Fer.*, *Rheum*, *Phosph.*, *Phosph. ac.*, *Sec.*, *Sulph.; d*, if the discharges take place principally **early in the morning**, *Bry.*, *Nux v.*, *Sec.;* soon or immediately after a **meal**, especially, *Sec.*, *China*, *Dulc.*, *Bry.*, *Ars.*, *Fer.*, *Coloc.;* in the **evening** or afternoon, *Dulc.*, *Puls.;* especially **at night**, *Merc.*, *Dulc.*, *Ars.*, *Sulph.*, *Cham.*,

*China*, *Puls.*, *Rhus t.*, *Verat. alb.;* **before** midnight, *Puls.*, *Rhus t.;* **after** midnight, *Sec.*, *Ars.*

## 2. Dysentery.

1. If the dysentery sets in with violent fever, I give unhesitatingly *Acon.*, more particularly if the patient complains of a good deal of tearing distress in the head and limbs; in such circumstances *Acon.* is sufficient in very many cases to cure the whole disease in two or three days. If *Acon.* is not sufficient, I then resort in every case to *Merc. viv.*, especially if a good deal of bloody mucus is discharged, or even pure blood with violent urging to stool and severe colicky pains; and if there is no essential improvement soon after taking *Merc.*, and scarcely any thing but blood continues to be discharged, with vomiting, I give *Ipec.;* if the bloody discharges are accompanied by a tearing-cutting pain in the bowels, I give *Bell.;* if the colic is very severe, crampy, spasmodic, and the evacuations principally consist of a bloody mucus, I give *Coloc.*, and if this does not effect an improvement in 24 hours, I resort to *Staphys.;* this course has proved much more effectual in my hands than the alternate use of the two last-mentioned remedies recommended by Hering.

2. Very seldom so many remedies will be required if the treatment of dysentery is confided to our hands from the commencement; in such a case, if there is not much fever, *Merc. viv.* and especially *Corrosivus*, if given at the onset, will very soon transform the bloody discharges into mucous stools, after which *Sulph.* and *Puls.* or even *Rhus t.* will often be found quite sufficient to change these mucous stools to natural discharges.

3. If in a case of inflammatory dysentery with rheumatic pains, the fever as well as the bloody stools have been removed by *Acon.*, and colicky pains remain, with more or less tenesmus at stool and a partial return of fæcal discharges; if moreover the days are very hot and the nights cool, and *Merc.* should have no effect, *Bry.*, or even *Nux v.* often helps; or even *Colchicum*, if the evacuations consist of mere mucus without blood, but with a good deal of tenesmus; or *Ipec.*, especially if the mucous stools are very fetid.

4. If in spite of all treatment various single symptoms remain, such as tenesmus, slimy discharges with or without pain; or if

blood again reappears in the discharges from time to time, there is no better remedy than *Sulph.*, which should be resorted to in every case if the disease, after the first violent outbreak is subdued, threatens to run a protracted course.

5. If, in consequence of improper management or because the physician was called too late, the disease shows signs of a malignant character and threatens to assume a typhoid type, with involuntary discharges especially at night, in bed, unaccompanied by any pain, and the tongue is brown and dry I give, if called at this stage, *Rhus t.*, and if this does not help soon, and the discharges and the urine have a fetid smell, with or without petechiæ, or if the patient lies in a state of stupor or tosses about in extreme agony, I give *Ars.* In most cases this remedy alone will help, and it will scarcely ever be necessary to use *Carbo veg.* or *China*, although in the case of a lady who had been treated allopathically, I had to resort to *Carbo veg.* in order to control this putrid condition, after which *Ars.* had again to be given to complete the cure.

6. As regards *Aloes*, *Baryt.*, *Canthar.*, *Caps.*, *Hepar*, etc. which have likewise been recommended as remedies for dysentery, I have had no experience in their use, and it is likewise my belief that a beginning practitioner will do much better to adhere to the known and long-tried remedies with their above-mentioned, reliable indications, than to embark on experiments with new drugs.

### 3. Cholera-morbus and Sporadic Cholera.

1. **Cholera infantum, Summer-complaint, cholera-morbus** of children.—In most cases, which do not proceed from a more deep-seated, organic affection, such as softening of the stomach or incipient hydrocephaloid, but which owe their existence to purely accidental causes, such as a cold, derangement of the stomach, or atmospheric influences, *Ipec.* is the most effectual remedy, especially if the diarrhœa is yellowish and watery, and a white mucus is vomited, attended with colic and a good deal of tossing about and crying. If the vomiting consists of green or yellowish mucus and is attended with a diarrhœa consisting of thin papescent mucus, with great desire for cold water, great lassitude, rapid emaciation, and coldness of the extremities, *Verat. alb.*

is preëminently indicated; whereas *Ant. cr.* deserves a preference if the skin is hot and dry, liquids are more particularly vomited up, and the diarrhœa is yellowish and very offensive. If, in spite of all treatment, the children grow weaker, their features collapse and the face looks cadaverous, the evacuations from the bowels are exceedingly frequent, no remedy does more good than *Ars.*, which, however, has to be given in very small doses lest it should occasion aggravations which, although transitory, are always very disagreeable. If, in a case of medicinal aggravation of the symptoms, *Verat. alb.* has not yet been given after *Ipec.*, one or the other of these two remedies very frequently not only subdues the aggravation, but likewise removes at the same time the original malady. If these two remedies had already been given, *Nux vom.* often very speedily cures the case, after such an aggravation by *Arsen.* I have likewise not unfrequently found *Cham.*, *Rhus t.*, *China*, *Sec.* and even *Sulph.*, speedily useful in such cases, in accordance with the symptoms mentioned on page 147, 8.

2. **Sporadic cholera** of adults.—This form of cholera differs essentially from true or Asiatic cholera in the circumstance that the vomiting and diarrhœa always retain the simply catarrhal, rheumatic or gastric character; that the rice-water discharges by the mouth and rectum, as well as the asphyctic, spasmodic and paralytic symptoms never occur in this form of cholera, and that it generally never passes through the different stages of Asiatic cholera. In most cases *Ipec.* is the most effectual and the only necessary remedy. It is only if this remedy is not sufficient, or if the evacuations which set in more particularly after midnight or early in the morning on rising are associated with violent colicky pains or sudden and excessive prostration and coldness of the body, and even cold sweats, that *Verat. alb.* is to be preferred. If *Verat. alb.* does not relieve the prostration, or if this is at the onset associated with præcordial anguish and burning at the pit of the stomach, in such a case, and only in such a case *Ars.* is indicated. If exhibited in milder attacks of cholera at the commencement without these indications, it often merely aggravates the condition, and very readily throws the patients into a state of great restlessness and nervous irritability, which is indeed controllable by *Nux vom.*, but might be avoided. If *Ipec.* does not help in milder cases, and if there are no definite indications for *Verat. alb.*

*China* will sometimes be found appropriate, especially if the evacuations contain undigested material and are accompanied by vomiting of the ingesta and oppression and distension of the stomach and epigastrium after every meal; likewise *Cham.*, if the vomited substance and the undigested stools have a sour smell. Beside these remedies the following remedies may be relied on in milder cases which obstinately resist the above-mentioned drugs: *Dulc.*, *Puls.*, *Rheum.*, *Sec.*, *Sulph.* and even *Merc.*, the indications of which can be found under "Vomiting" and "Diarrhœa."

## 4. Asiatic Cholera.

On perusing the mass of observations, opinions and nosological views which Rueckert has extracted from the literature of Homœopathy as bearing upon this disease, one is seized with a secret shudder at the confusion and utter absence of uniformity in the treatment of this destroyer, one proposing *Ars.*, where another advises *Verat. alb.* or *Cupr.*, *Ipec.* or *Sec.* as best conducive to the end, and so in regard to all other remedies. Yet for any one who knows how to pick out and adhere to a few truly-characteristic indications, nothing is easier than to learn in a few words the successful treatment of cholera and to find the correct remedy much more speedily than in the simplest diarrhœa without any particular secondary symptoms. I will try to represent this matter as simply and briefly as possible, under the following heads: 1, Prophylaxis; 2, Cholerose; 3, Cholerine; 4, Cholera.

1. **Prophylaxis of Cholera.**—Except Hering's proposal to wear *Sulph.* between a woolen stocking and the sole of the boot, I do not know of a single prophylactic measure that has stood the test of experience. On the contrary I have seen several persons attacked by Cholera who used *Verat. alb.*, *Cupr.* and *Camphor* quite liberally and never went out a single morning without first having swallowed one or the other of these remedies according as their caprice or a methodical routine prompted them. Those who took *Veratrum* at the first premonitory sign of diarrhœa and did not repeat the medicine until another attack of diarrhœa set in, remained all of them exempt from cholera, so that, during the cholera-years of 1853, 1854, 1865 and 1866, I had not a single case

of cholera to treat either among my regular patients, or among acquaintances who took Veratrum as advised. My cholera-patients were either strangers or such as came to me from the hands of other physicians. I can say the same thing of those who used *Sulph.* as a preventive in accordance with Hering's advice; yea, the peculiar feeling of *malaise*, which I have denominated Cholerose, and which tormented a great many of those who were not attacked with cholera, during the prevalence of this epidemic, disappeared soon after the employment of *Sulph.* according to Hering's method, as I have noticed in others as well as myself, and many things which were apt, under ordinary circumstances, to cause diarrhœa, such as milk, raw or cooked fruit, cabbage and other green vegetables, etc., might be partaken of without any injurious consequences, so that, even to this day, I know of no better prophylactic rules than the two just mentioned.

2. **Cholerose.**—By this name I understand the general feeling of malaise that torments a good many people during the prevalence of cholera and which manifests itself in some by a febrile condition, with chilliness and dread of a current of air in the day-time, with warm night-sweats that leave more or less exhaustion; in others by gastric derangements, such as loss of appetite, nausea, with or without vomiting which affords relief; likewise by a feeling of discomfort and anxiety in the abdomen, with dull pains, constant rumbling, and urging to stool with or without diarrhœa which affords relief; also by difficulty of breathing and oppression; or vertigo and headache; or constant lassitude and debility; and finally by cramps in the calves which set in principally at night. The removal of all these feelings of discomfort belongs properly speaking to the prophylactic range of cholera, since they are really nothing else than precursory symptoms of this plague. The most dangerous of these phenomena is the diarrhœa, not only, because, if neglected, it may result in an attack of cholera that may assail and destroy a person with the rapidity of a flash of lightning as it were, but likewise and more particularly because this diarrhœa, quite painless of itself, surprises those who are attacked by it, so much less as it generally frees them from the feeling of discomfort in the bowels which some of them had felt for weeks previous, and not a few believe, in their ignorance, that nature endeavors to find relief by such a spontaneous purgation, and that it would be

improper to arrest it by artificial means. Fortunately we have the means of not only combating this insidious premonitory diarrhœa, but likewise to eradicate all the other precursory symptoms as soon as they show themselves. The febrile condition with the exhausting night-sweats mostly yields at once to *Acon.;* the gastric symptoms and the nausea are as speedily relieved by *Ipec.*, or, according to circumstances, by *Puls.*, *Nux vom.*, *Bry.*, *Carbo veg.*, *Verat. alb.;* the vomiting by *Ipecac.*, *Verat. alb.* or *Carbo veg.;* the præcordial anguish by *Ars.* or *Verat. alb.*, and sometimes by *Calc.* or *Carbo veg.;* the diarrhœa in the first place by *Verat. alb.*, and if this is not sufficient, by *Sulph.* almost certainly, and in most cases by a single dose, so that in a few cases only *Ipecac.*, *Phosph.* or *Sec.* are required; the dyspnœa by *Carbo veg.* or *Sulph.;* the vertigo and headache by *Bell.* or *Camph.*, a drop of the spirits on sugar; the lassitude and weakness by *China*, or likewise by *Verat. alb.*, *Ars.*, *Ipecac.*, *Carbo veg.*, *Fer.;* the cramps in the calves by *Cham.*, or by *Cupr.*, *Coloc.*, *Verat. alb.*, all these remedies being mostly given in a single dose, two globules of the thirtieth attenuation, which dose may, however, be repeated, if the former dose had effected an improvement which, having ceased, was again succeeded by an exacerbation of the symptoms. I except from this rule *Camphor*, of which I have been in the habit of giving one drop of the spirits on sugar for the vertigo, and *Acon.* 30th, three globules, for the fever and night-sweats; I dissolve the globules in water, giving a teaspoonful of this solution every three hours, by which means I have removed within 24 hours feelings of malaise that had tormented the patient for weeks.

3. **Cholerine.**—This mostly painful, usually febrile and not unfrequently obstinate diarrhœa, is not a precursory symptom of cholera, but is really a variety of sporadic and dysenteric cholera. It cannot even be regarded as the first stage of cholera, since, if badly managed, it does not necessarily run into real cholera, which the above-mentioned premonitory diarrhœa almost always does. From this last-mentioned diarrhœa cholerine is distinguished among other symptoms by the circumstance that it is not, like the diarrhœa, a sort of painless fæcal diarrhœa, but is characterized by exceedingly frequent, watery, at times greenish, and at other times blackish or grayish evacuations attended with more or less colic, or sometimes even flocculent evacuations, but never resem-

bling the rice-water evacuations of cholera, although they may be associated with the peculiar huskiness and faintness of the cholera-voice, excessive weakness which does not permit the patient to remain up (when attacked by the premonitory diarrhœa, the patients often continue their regular avocations), sunken features, burning thirst and great anxiety and restlessness, cramps in the calves, and more or less vomiting. If such a cholerine is attended with much vomiting, *Ipec.* is generally the most efficient remedy, more particularly if mucous, bilious substances are evacuated; likewise *Verat. alb.*, if *Ipec.* is not sufficient, and great coldness of the extremities, anxiety and restlessness have supervened; or perhaps *Ars.*, if *Verat.* is unable either to diminish the anxiety and coldness of the extremities or the evacuations, and burning in the bowels and an unquenchable thirst have set in. If the vomiting is entirely absent, or is overshadowed as it were by the frequent watery stools, in such circumstances the most effective remedy is generally *Phosph.*, more particularly if the watery and utterly painless discharges still retain the color of fæcal evacuations, and are poured forth in a stream, without the least disposition to vomit being present; *Phosph. ac.*, if these painless, green, whitish or blackish evacuations become associated with more or less vomiting, and the tongue is so sticky that the finger, when touching it, adheres to it, and the weather is rather hot than cold. If in such cases neither *Phosph.* nor *Phosph. ac.* helps, *Sec.* may render excellent service, and if none of these remedies effect a complete cure or do not even ameliorate the condition of the patient, *Sulph.* may still be found capable of saving the patient. Most generally I prescribe these remedies in form of a watery solution, three pellets of the 30th, although I have had cases where a single dose of two pellets dry on the tongue effected a cure within 24 hours as by a miracle. If the patient is not sick enough to require to be seen more than once in 24 hours, I do not change the medicine during this period; but if the attack is so violent that the patient has to be seen morning and night, I sometimes have recourse to another drug in 12 hours, provided the previous medicine had not effected the least change.

4. **Cholera.**—If Dr. Schweikert, Jr. made the statement in one of our Periodicals (I do not now recollect the exact passage), that we only obtained greater certainty in the treatment of cholera

from the moment when we paid more particular attention to the diagnosis of this disease, he was both right and wrong, the latter more especially, if his object was to designate the doctrines of Hahnemann as deficient. If, by diagnosis, he understood an investigation of the unknown essence of the disease, a proceeding that has indeed been strenuously repudiated by Hahnemann, his statement is incorrect in so far as we have not advanced a hair's breadth in this particular for the last forty years, and we are not even able to state with positive certainty what change in the functions or tissues of the organs is the first and hence the true internal cause of the morbid process which is going on in cholera. If the author of that statement meant the so-called differential diagnosis which teaches us to distinguish the various forms of a disease, he is undoubtedly correct, since we are able, at the present time, to distinguish the different varieties of cholera as perfectly as such a thing is possible. On the other hand, if it is his opinion that such a differential diagnosis is a progress of modern homœopathy in contrast with Hahnemann's, this opinion is certainly erroneous. The founder of our school, by advising in all cases a rigorous method of individualization, not only taught by implication the necessity of distinguishing the single forms of a fixed and positive disease, but at the same time exhibited this method to us by his own example and in its most perfect form in diseases which emanate from the same miasm; whose general forms are consequently fixed and permanent, such as cholera, scarlatina, purple-rash, measles, croup, etc., and the names of which it was a part of his plan to preserve. Hence all that we have accomplished by means of Dr. Schweikert, Jr.'s justly-lauded and improved differential diagnosis of the special forms of cholera is, to comply with one of the first requisites of the Organon, which is to proceed in all fixed diseases logically and without erring from more comprehensive series of phenomena to the more subtile and more individual symptoms. In obedience to this principle I now proceed to mention the most efficient remedies in the different forms of cholera which I have found to be of any practical value.

*a*, **Simple Cholera** which manifests itself only as an attack of vomiting and diarrhœa, but with the peculiar rice-water discharges.—If the vomiting prevails, I commence the treatment at once with *Ipecac.* which, in such a case, sometimes cures the

whole disease; if *Ipec.* is not sufficient, or if the alvine evacuations prevail from the start, I give *Verat. alb.*, but I never give at this stage either *Ars.*, *Cupr.* or *Camph.*, either of which remedies only adds new and troublesome symptoms to the existing group, so that we now have to resort to medicines that would have cured the whole disease at once if we had used them at the onset. I have likewise witnessed the splendid curative powers of *Sulph.* 30th, recommended by Hering, two pellets to be taken at once if the patient wakes up with the attack. Three American travelers had already taken this remedy from their pocket-cases when they sent for me. On my arrival the whole trouble was ended. *Sulph.* helps even if *Ipec.* and *Verat. alb.*, in fully-developed simple cholera, have no effect.

*b*, **Spasmodic Cholera.**—This form of cholera, which, under ordinary circumstances, only sets in if simple cholera is neglected or mismanaged and thus is permitted to run its course, may likewise set in very suddenly if the premonitory diarrhœa had remained unnoticed, and may either be accompanied by vomiting and diarrhœa, or may only manifest itself by spasms and convulsions, the evacuations being either entirely absent or only very slight. In the latter case I give drops of the *spirits of Camphor* until the spasms abate. In most cases this agent has the desired effect; but if it should not, I give, according to circumstances, *Cupr.*, *Secale*, *Verat. alb.* or *Ars.*; it the convulsions are tetanic, *Ipec.* or *Secale*; if the extremities are attacked by tonic spasms, *Verat. alb.*, *Secale* or *Ipec.*, if the convulsions commence in the tips of the fingers and toes, *Cupr.*, *Sec.*, or *Verat. alb.*; if in the calves, *Cupr.* or *Secale*, and if the chest is particularly invaded, *Cupr.* or *Arsen.* If these spasms supervene, as is generally the case, during the course of a badly-managed simple cholera, or if they break out simultaneously with the latter, I give *Ipec.* or *Verat.* if neither had yet been administered, first *Ipec.* or *Cupr.*, if the vomiting prevails, and *Verat. alb.* if diarrhœa prevails, or if both the vomiting and diarrhœa are equally severe, or the patient loses his strength rapidly and the skin on the hand, if pinched up, remains in this condition. If *Verat. alb.* has no effect, I then give first *Sec.* and do not resort to *Ars.* unless all the above-mentioned remedies remain ineffectual, or else at the very commencement if *Ars.* is indicated by extreme prostration, excessive anguish and restlessness, dread

of death, and the intolerable burning, as from an incandescent coal, in the stomach and pit of the stomach; by pursuing this course I have succeeded in curing most of my cases of cholera without *Ars.*

*c*, **Asphyctic and cyanotic Cholera.**—These two forms of cholera, into which simple cholera, if neglected, very soon runs, are so intimately interwoven that, where the pulse is no longer perceptible, the cyanotic tinge is most generally seen, and vice versa, where the cyanotic tinge exists, the pulse likewise is suspended. These forms do not require any special treatment since the remedies for simple and spasmodic cholera, with which asphyxia and cyanosis generally appear associated, more particularly *Verat. alb.*, *Cupr.*, *Camph.*, *Ars.*, if they otherwise correspond, will likewise remove these two conditions, as I have often witnessed in my practice, generally even before the diarrhœa and vomiting cease, a return of recovery generally announcing itself first by a return of pulsation. It is only if, after a complete cessation of the vomiting, diarrhœa and spasmodic symptoms, the **pulselessness** and **cyanotic coloration** of the skin remain, that *Carbo veg.* and sometimes *Phosph.* and *Lauroc.* prove exceedingly efficient in warding off the threatening paralysis of the lungs and heart.

*d*, **Paralytic Cholera.**—After having seen in the year 1849 a patient expire whom I found, upon my arrival at his bedside, without vomiting or diarrhœa and in a state of complete paralysis of all the cardiac, intestinal and muscular functions, with complete cyanosis of the whole body, and whom neither *Carbo veg.*, *Phosph.* or *Lauroc.* were able to save, I was called on the same day, in consultation with my colleague, Dr. Croserio, to another patient whom we found in the same condition. Informed by me of what had happened in the other case, my colleague, being unwilling to lose time with useless experiments, determined to try the curative virtues of *Camphor.* Large pieces of Camphor were procured, and dissolved in a bottle of alcohol, with which the patient was rubbed from head to foot, and moreover covered with compresses that had been soaked with this liquid. Before ten minutes had elapsed, the patient commenced to breathe more perceptibly, the pulse gradually returned, and on the evening of the same day, after he had been under treatment since three o'clock in the afternoon, he was com-

pletely restored to life and only required a little additional treatment for the violent fever which set in the next day.

*e*, **Reconvalescence.**—The tumultuous reaction in the vascular system which, in the case of convalescent persons, leads to an accumulation of blood in the liver or lungs with symptoms of asphyxia, or in the brain with symptoms of sopor or other typhoid appearances, occurs much less frequently under true homœopathic treatment with the smallest possible doses of specifically-indicated homœopathic remedies than either under allopathic treatment or under homœopathic treatment with massive doses of more or less superficially-selected remedies. Nevertheless, if the patients, after having sunk very low under allopathic or any other violent treatment, finally convalesced in my hands, I have sometimes observed slight indications of these violent reactive phenomena which I have been in the habit of combating, 1, signs of tumultuous congestion by *Acon.* 30th, two globules in a few tablespoonfuls of water, a teaspoonful every two or three hours, which remedy is, in most cases, sufficient to restore the physiological equilibrium. If the congestion had become localized before the arrival of the physician, and *Acon.* has no longer the speedy and complete effect which it possesses when brought to bear upon the violence of the reaction at the onset, the best remedies, in case the lungs are attacked, are *Phosph.* and *Carbo veg.;* if the **liver** is especially invaded, *Bell.*, *Bry.*, *Laches.* or *Merc.;* if the brain, with sopor or threatening apoplexy, *Bell.* or *Laches.* For the **cholera-typhus** which is very apt to remain as a sequel of allopathic treatment and which I have only witnessed in the case of patients who came under my treatment from allopathic hands, the remedies which are most frequently successful, if we are called at the very commencement of the treatment, are *Bell.* and *Hyosc.*, if the cerebral symptoms are most prominent; *Bry.* or *Rhus t.*, if the affection takes more particularly the form of abdominal typhus. Most generally the disease is very speedily controlled by these remedies, unless it had been in existence for a few days before the homœopathic physician was called, in which case other remedies will be required beside those I have named, such as: *Phosph.*, *Phosph. ac.*, *Carbo veg.*, *Cocc.*. If after a successful treatment of the cholera and the reactive symptoms, other secondary affections remain, such as gastric complaints, nausea, weakness of

digestion etc., *Sulph.* will be most generally found useful, although, according to circumstances, *Carbo veg.*, *Merc.*, *Bry.* and *Rhus t.* are likewise of great use in some cases. *Sulph.*, and, if it should fail, *Calc.*, *Phosph.* and *Sec.*, likewise relieve the remaining weakness of the intestinal canal. The remaining general debility yields likewise much better to *Sulph.* and *Calc.* than to *China*, which, however, is likewise often beneficial.

*f.* **Conclusion.**—As for the rest of the remedies that have been recommended for cholera, such as: *Amm. caust.*, *Arg. nitr.*, *Asar.*, *Canth.*, *Cic.*, *Conium*, *Dulc.*, *Hell.*, *Iatrop.*, *Stram.*, *Tab.*, *Tart. stib.*, I have never used them, because I have never seen them indicated and do not wish to act blindly. Except *Camphor*, I have administered all my remedies in the year 1849 in the 12th attenuation, and in the years 1853, 1854, 1865 and 1866 only in the 30th, three pellets in a few spoonfuls of water, of which I gave, according as the case might require, a teaspoonful every half hour, or every hour, two or three hours, and, if the symptoms were less tumultuous, such as the precursory symptoms of cholera, or the non-febrile, more or less chronic after-symptoms of this epidemic, a single dose of two pellets of the thirtieth attenuation. At the same time I have never given two remedies in alternation, but have always waited to see what one remedy, having selected it with the greatest care, would do, after which, if the result did not satisfy me, I changed the prescription. By pursuing this course I have effected many truly-wonderful cures, and have become firmly satisfied that if a remedy is specifically indicated, the smallest dose which, if necessary, may be repeated, accomplishes every thing that the medicine is capable of, and, every sign of violent reaction or every secondary symptom being avoided, sometimes much more speedily than larger doses; moreover that, where such small doses do not achieve any results, larger doses do not accomplish any more, and some other more suitable remedy will have to be chosen. In my introduction to this work I have related a case of cholera where a single dose of two pellets of *Verat. alb.* 30th, had already corrected the rice-water discharges, had raised the pulse, moderated the agony and restlessness, and had initiated a complete improvement before my prescription of a watery solution of the same dose had arrived from the pharmacy. I have seen several such cures wrought by a single dose which I administered during

my visit at the patient's residence and ordered a watery solution from the pharmacy for the further use of the remedy; or where my patients had already taken a few pellets at the first appearance of the symptoms of an attack, before I was able to reach them. Nevertheless if the violence of the symptoms renders the necessity of repeated doses evident, I resort at once to watery solutions which, even if the patient takes a teaspoonful every fifteen minutes, do not introduce as much material substratum into his organism as several doses of dry globules in the course of a day would do. This proceeding has the additional advantage that a teaspoonful of a dose thus divided can be administered much more frequently and without prejudice to the patient, a method which is undoubtedly much more important and salutary than the less frequent exhibition of larger doses. Here, however, as well as every where else, the main point is the selection of the suitable remedy; if this rule is neglected, the patient runs the risk, in spite of large doses, of succumbing to the malady, a result which I have observed not only in the case of lay-persons who undertook to treat themselves, but likewise in the case of beginning practitioners who, even in mild cases where a dose of *Ipec.* 30th might have cured the whole disease, in their inexperience and full of apprehension, at once bore down upon the patient with the lower attenuations of *Cupr.*, *Verat. alb.* and *Arsen.*, of which they prescribed drop-doses alternately every half hour, in the hope that, if one remedy should remain unsuccessful, the other would certainly accomplish a cure. I have seen such treatment lead to the most tumultuous aggravations and irritations which finally resulted in destroying the patient; only in two cases of this kind I succeeded in quieting the tumult, in one case by *Sec.* and in the other by *Ipec.*, after which the above-mentioned drugs, which had been given without sense or order, when administered each in its place and in the smallest dose, afforded the most perfect relief. Giving the smallest possible dose has moreover the advantage that, if the remedy does not answer our expectations, another remedy can be chosen much more safely without giving rise to an apprehension that the previous remedy, as is sometimes the case when medicines are given in massive doses, may manifest its action notwithstanding, and may thus interfere with the curative influence of the new agent. He who, even in cholera, will try to operate with the smallest doses of a most carefully-selected remedy, and

to watch the most trifling changes in the condition of his patient with the most persevering attention, will soon find that such a method leads more speedily, more gently and more safely to the desired end.

## 5. Constipation.

1. **Habitual Costiveness.**—Inasmuch as habitual costiveness is a symptom of some constitutional diathesis or chronic infirmity, it is quite natural that in most, if not in all cases, it must be very difficult to afford relief from such an inconvenience. Nevertheless I have had cases where, in treating chronic diseases, and most commonly after a previous aggravation, the alvine evacuations became easier and more regular, more particularly if, after having given one, two or three doses of the remedy appropriate to the original malady every two or four days, I now allowed the medicine to act for a few weeks without its action being disturbed by any other drug. This good effect was principally produced by *Sulph.*, *Calc.*, *Lyc.*, *Sepia*, *Graph.*, *Alumin.* and *Kali carb.*, whereas I have seen no other than merely transitory effects from *Bry.*, *Nux v.*, *Op.*, *Plat.*, *Plumb.*, *Cocc.* and *Verat. alb.*

2. **Accidental Constipation.**—This likewise may become a source of great trouble to a homœopathic physician, especially if persons who have not had a motion of the bowels for a week, now want to have their bowels moved in less than no time, and in whose case even injections had remained ineffectual. In such circumstances *Opium* has rendered me excellent service, more particularly if a desire for stool seemed to have become entirely extinct and the anus seemed closed; likewise *Plumb.* or *Alumin.*, if *Opium* did not act within 24 hours; or *Platina*, if in spite of every effort only small and insufficient fragments were passed; Beside these remedies, *Sulph.* or *Nux vom.* helps if there is a good deal of ineffectual urging, especially in the case of people who are afflicted with hæmorrhoids; or *Laches.*, if the constipation is attended with a good deal of pressure at the stomach and the stool is very hard; if the constipation occurs during the heat of summer, it is relieved not only by *Bry.*, but very often by *Carbo veg.* or *Ant. cr.;* if it occurs in very cold weather by *Verat. alb.;* the constipation of persons who lead a sedentary life, is relieved by

*Nux vom.*, *Bry.*, or *Cocc.;* that of children, infants at the breast, etc. by *Nux vom.*, or *Bry.;* that of pregnant females, by *Sepia*, or by *Nux vom.*, *Bry.*, and *Alumin.;* that of lying-in women, beside the remedies above-mentioned, by *Plat.*, *Antim.* or *Opium;* constipation caused by traveling, riding in a carriage, by *Alumin.*, *Plat.;* that of old people, changing about with diarrhœa, by *Ant. cr.*, *Phosph.*, *Laches.*, *Bry.;* that of drunkards, especially by *Nux vom.*, *Sulph.*, *Calc.*, *Laches.;* that remaining after purgatives, by *Opium*, *Nux vom.*, *Laches.*, *Antim.;* that of workers in lead, painters, by *Opium*, *Plat.*, *Alumin.*

### 6. Affections of the Rectum and Anus.

1. **Hæmorrhoidal Complaints.**—For hæmorrhoidal tumors at the anus, without any discharge of blood, or other ailments, *Puls.* often affords rapid relief, especially in the case of women; likewise *Nux vom.*, especially in the case of men; and generally in various cases indiscriminately, *Ignat.*, *Caps.*, *Sulph.* and *Arsen.;* if the tumor is very large and the above-mentioned remedies are not sufficient, *Bell.*, *Muriat. ac.* and *Thuja* help very often, and if the rectal tumors **protrude,** *Sulph.*, *Calc.*, and *Nitr. ac.;* and if they form a painful **pad-shaped protuberance** around the anus, for which *Nux vom.* and *Calc.* are not sufficient, *Muriat. ac.* often renders excellent service; or if there is a good deal of **itching,** *Acon.*, *Sulph.*, *Nux vom.*, *Carbo veg.*, *Ignat.*, *Ars.;* and if the protruded tumors are **constricted,** *Acon.*, *Ignat.*, *Bell.*, *Sepia;* if the tumors become **inflamed** and painful, and *Puls.* does not relieve this condition, aid is frequently obtained, especially in the case of **burning** pains, from *Ars.*, or *Carbo veg.*, and likewise from *Sulph.*, *Caps.*, *Nux vom.;* if the tumors feel **sore,** from *Ignat.*, and if they sting a good deal, from *Acon.*, *Ignat.*, *Carbo veg.*, *Nux vom.*, *Sulph.* or *Nitr. ac.;* if the tumors commence to **suppurate,** from *Puls.*, *Sulph.* or *Ignat.;* if they **bleed** frequently, especially during or after stool, from *Acon.*, *Carbo veg.*, *Nux vom.*, and likewise from *Cham.*, *Bell.*, *Sulph.*, *Mur. ac.*, and *Kali carb.;* if **dampness** oozes from them, from *Sepia*, *Sulph.*, *Phosph.;* if the loss of blood is very profuse so that it almost resembles a **hæmorrhage** from the anus, *Acon.* often affords speedy relief, likewise *Bell.*, *Calc.*, *Caps.*, *Sulph.*, *Mur. ac.*, and sometimes *Ipecac.* and even *China;* if a good deal **of** mucus is

continually discharged from the anus, the best remedies are *Phosph.*, *Sepia*, *Antim. cr.* and *Carbo veg.;* and sometimes *Nux vom.*, *Sulph.* and *Caps.*, if the discharge of mucus is attended with a good deal of tenesmus; and if the mucus is at the same time **bloody,** and neither *Sulph.* nor *Nux vom.* will help, *Caps.*, *Ignat.* or *Puls.* Finally, if the hæmorrhoids cause other complaints and the suppression of the bleeding causes a **rush of blood** to the head, relief is obtained in most cases from *Nux vom.*, *Calc.* or *Sulph.*, and likewise sometimes from *Carbo veg.* or *Bell.;* for rush of blood to the **chest,** with dyspnœa, palpitation of the heart etc., from, *Sulph.*, *Puls.*, *Arsen.;* for **abdominal difficulties,** flatulence, nausea, sensation of repletion in the abdomen, from *Nux vom.*, *Sulph.*, and often from *Carbo veg.*, *Caps.*, *Graph.*, *Calc.;* for hæmorrhoidal **colic,** especially from *Sulph.*, or, if attended with much **flatulence,** from *Nux vom.* or *Carbo veg.*, and, if attended with anxiety and restlessness, from *Arsen.;* if attended with severe **pain** in the **small of the back,** especially from *Nux vom.* or *Sulph.*, and very often from *Ars.*, *Acon.*, *Bell.*, *Nux vom.*, *Cham.*, *Caps.;* if attended with great **restlessness at night** and **burning** in the blood-vessels and great weakness, from *Ars.;* if attended with **costiveness,** indolent stool, from *Sulph.*, *Calc.*, *Nux vom.*, *Graph.*, *Ars.;* with **diarrhœa** or soft stools, from *Puls.*, *Phosph.*, *Sulph.*, *Nitr. ac.* or *Calc.;* with difficulties of the **bladder,** dysuria etc., from *Acon.*, *Nux vom.*, *Puls.*, and sometimes from *Sulph.* [In hæmorrhoids I have tried with good effect *Æsculus*, *Collinsonia and Hamamelis.* H.]

2. **Other Affections** of the **Anus** and **Rectum.**—The worst affections are fistulæ of the rectum, which it is difficult to cure, were it only for the reason that every passage of fæces irritates the sore and causes the most acute suffering, so that the patients would rather submit to the most painful operation than to bear this distress any longer. In some of the slighter cases of this trouble I have succeeded in inducing cicatrization, more particularly by means of *Sulph.*, aided by *Ign.*, *Calc.* and *Silic.* For the frequent **protrusion** of the rectum I know of no better remedy than *Ignat.* and *Nux vom.*, and, if these should not suffice, *Sep.*, *Calc.* and *Sulph.;* if the fallen rectum is at the same time **inflamed,** *Acon.* often helps, or *Merc.;* and, if it is apt to fall at every emission of urine, and neither *Ignat.* nor *Nux vom.* helps, *Mur. ac.* may be given; if it falls more particularly while the person is walking,

*Arn.* or *Sep.*, and, if the protrusion takes place without any particular cause, especially after a severe diarrhœa, *Ruta* may be given [*Hamamelis* is likewise efficient in this affection. H.] Concerning **carcinomatous** affections of the rectum, and concerning **paralysis** of the sphincters of the anus, I have no experience to state.

## CHAPTER XVI.

## AFFECTIONS OF THE URINARY ORGANS AND URINARY SECRETIONS.

### 1. Affections of Single Organs.

1. **Renal Affections.**—If *Acon.* has no effect in acute nephritis, the first remedy to which I then resort, is *Cann.*, with which I have cured the disease as well as with *Acon.* in a few days, no matter whether blood was discharged with the urine or not. Only in a few cases I have been obliged to have recourse to *Canthar.*, and have very often removed the dull pains in the kidneys which remain after such inflammations, by means of *Nux vom.*, *Puls.* and *Sulph.*, whereas *Bell.* only helped if the stitching pains in the kidneys were associated with violent colic and great anxiety and restlessness; and likewise *Puls.* if the inflammation was accompanied by a spasm extending to the scrotum. Even if the inflammation appeared to have been occasioned by abuse of spirits and set in with an acute fever, *Acon.* and *Cann.* did infinitely more good than *Nux vom.* In chronic nephralgia, on the contrary, *Nux v.* as well as *Canth.* have an excellent effect. If the pain is occasioned by calculi, the best remedy is *Cann.*, and sometimes *Puls.* and *Zinc.*, and even *Lyc.* may render good service. If the kidneys suppurate and waste away, *Puls.* often proves very useful, and *Sulph.* and *Lyc.* still more so. In all these cases the kind of pain is of very little consequence, since it does not yield a single reliable indication and the practitioner who would take this for his guide would be exposed to nothing but mistakes.

2. **Affections of the Bladder.**—What *Cann.* accomplishes in acute nephritis, is accomplished by *Canth.* in acute cystitis, although, in this case, if there is intense fever, *Acon.* is likewise indicated in the first place, which often, as in other cases, removes the whole trouble in a very short time. *Puls.* likewise

often helps if the region of the bladder is externally hot and red, and the patient complains of pressure, and a cutting and urging in this region. Other remedies are: *Canthar.* for a **bloody** discharge drop by drop; *Cann.* for a complete **retention of urine**; if this does not help and if the bladder is very much distended, with violent burning, severe thirst and anguish, *Arsen.* often renders excellent service; and *Nux vom.* for the pains or difficulties which remain after the removal of the inflammation. In chronic nephritis, if the symptom of discharges of drops of blood is present, *Canth.* is likewise very efficient; *Puls.* and *Nux vom.* are sometimes, however, more appropriate in such cases, likewise *Lyc.* and *Coloc.*

3. **Catarrh of the bladder.**—If this sets in suddenly after a cold, in a rather acute form, and *Dulc.* and *Puls.* have no effect, *Lyc.* sometimes affords rapid relief if the urine has a foul odor, and *Coloc.* if the trouble is attended with severe labor-like pains in the abdomen extending down to the thighs. If the catarrh is **chronic**, *Sulph.* helps in a great many cases beside *Dulc.*, *Lyc.* and *Puls.*; *Carbo veg.* or *Nux vom.* if the catarrh had remained after cystitis. *Uva ursi* which is likewise recommended in such cases, has only been of real and speedy use in my hands in a single case where the mucous discharge was mixed with **blood.**

4. **Hæmaturia.**—If no other remedy is specially indicated, my chief remedy in such cases is *Cannab.*, and if this does not afford speedy relief, *Canthar.* If these two remedies have no effect, and the difficulty is caused by abuse of spirits, I give *Nux vom.*; if the discharge of blood is accompanied by **pains in the kidneys,** and a greenish urine and polypous formations are passed, *Calc.*; if the **region of the bladder** is particularly painful, with a feeling of warmth in the lower abdomen and great debility, *Ipec.*; if there is much **burning** distress in the **urethra**, *Arsen.*, *Canth.*, *Sulph.* or *Puls.* [also *Acon.* H.]; for **stinging** and cutting pains in the urethra, *Sulph.*, *Merc.*, or *Canth.*; for **spasmodic,** labor-like pains from the region of the bladder to the small of the back and thighs, *Puls.*, *Sulph.*, *Nux v.*; if accompanied by inveterate **constipation** and discharge of bloody coagula, *Lyc.*; if the blood is discharged **with** the urine or soon after an emission of urine, *Canth.*, *Merc.*, *Calc.*, *Lyc.*, *Cann.*; if blood is discharged **between** the acts of urinating, *Ipec.* or *Nitr. ac.*; if accompanied by **hæmorrhoids** of

the anus or bladder, *Acon.*, *Sulph.*, *Arsen.*, *Calc.*, *Nux v.*, *Carbo veg.* [*Erigeron canadense* should not be overlooked in hæmaturia. H.]

5. **Stranguria.**—Here too the main remedy in most cases is *Acon.*, especially if only a few drops of urine are passed with great pain, the urine is very dark, red and cloudy; or *Nux vom.*, especially if the difficulty is owing to suppression of hæmorrhoids, to new beer or abuse of spirits; or *Puls.* if menstrual suppression is the cause. If the disorder is attended with an inflammatory irritation of the kidneys and bladder, *Cannab.* and *Canthar.* often help, beside the above-mentioned remedies; and, if the urine is mixed with some blood, *Merc.* or *Hepar*, or *Nux vom.* Again, if there is a good deal of continued urging to urinate, *Acon.*, *Nux v.*, *Merc.*, *Canth.*, *Lyc.;* if the urine is discharged **drop by drop**, *Acon.*, *Nux v.*, *Cannab.*, *Canthar.*, *Merc.;* if there is much **burning** during the emission of urine, *Merc.*, *Lyc.* [also *Acon.* H.]; with pains **after** urinating, *Nux vom.;* after suppression of **hæmorrhoids**, especially, *Acon.*, *Nux vom.*, *Merc.*, *Sulph.*, *Calc.*, *Carbo veg.*, *Ars.*

6. **Ischuria.**—If this difficulty is purely nervous, accompanied by constipation, occasioned by fright or chagrin, *Opium* often affords rapid relief; if the bladder had become too much distended in consequence of a voluntary retention of urine, and a sort of **paralysis** had set in, *Hell.*, *Ars.* or *Nux vom.* For retention of urine generally, or difficulty of urinating owing to a paralytic inaction of the bladder, *Ars.*, sometimes *Dulc.*

7. **Lithiasis, stone, gravel.**—Whatever may be said of the power of *Lyc.*, *Calcarea urinaria*, *Opium* and *Sarsaparilla*, to expel or dissolve urinary concretions, so far I have never been able to accomplish the least result either with large or small doses of these agents, if the concretions had attained a certain size. *Puls.*, *Cann.*, *Sarsap.* and *Lyc.* have done wonders in my hands in alleviating renal colic and facilitating the passage of the calculi through the urethra, *Nux vom.*, *Bell.* or *Zinc.* scarcely ever have much effect in such cases. In the case of persons who were often troubled with the passage of renal concretions of a larger or smaller size, *Lyc.*, *Sarsap.* and *Calc.* in my hands have often occasioned an increase of these concretions, after which, even if they did not

entirely disappear, they were considerably reduced in size and number.

## 2. Morbid Urinary Secretions.

1. **Involuntary urination, wetting the bed.**—What is stated in Rueckert, Vol. II. p. 48, concerning the various constitutional indications for the selection of remedies for incontinence of urine, may be facts, but they are not fixed rules abstracted from a multitude of facts to which I might oppose a number of other facts where the same remedies effected cures under opposite conditions. When will physicians begin to comprehend that not all the symptoms that **happened** to be present in a given case, or the relation of which **happened** to appear of importance to reporters, do not, on this account, constitute characteristic indications for the selection of a remedy? And then how many cases are not reported! What would become of many inferences drawn from a number of purely accidentally reported facts, where we find statements like this, *Bell.* fourteen times, *Ars.* once etc., if all our physicians would report all the cures they have achieved! Would not the accidental fourteen or the accidental one be multiplied a hundred fold? This remark likewise applies to the enuresis of children. *Sulph.* is undoubtedly the remedy that has proved the most speedily and most frequently effective in my hands, no matter whether the children had a light or dark complexion, were well-fed or thin, neglected, pale, red, or had had the itch suppressed or not. Hence, unless some other remedy is plainly indicated by the presence of definite accessory ailments, I always first resort to *Sulph.* giving two or three doses within a period of eight days, which I allow to act for a long time. If this remedy is of no avail I give in the case of young girls, *Sepia*, *Bell.* or *Puls.;* and in the case of little boys principally, *Caust.*, and in the case of small and fat children, *Calc.;* by this means I have so far succeeded, even in the absence of all symptomatic indications, in curing every case of nocturnal enuresis. If distinct indications are present, I give in the case of scrofulous individuals, principally, *Bell.*, *Sulph.* or *Calc.;* if worm-symptoms are distinctly present, *Cina.* Again, if wetting the bed occurs during the first part of the night, *Sepia* or *Caust.;* and if children wet themselves involuntarily day and night, *Bell.*

or *Caust.* An inability to retain the urine, in the case of adults, caused by a sort of paralysis of the neck of the bladder, is likewise often cured by *Caust.*, and not unfrequently by *Arn.*, *Hyosc.*, *Rhus t.*, and *Ruta.* [*Helonine* and *Cochineal* are excellent remedies in the first stage of Bright's disease. H.]

2. **Diabetes.**—For **albuminuria** which is apt to lead to dropsy, I have so far found most efficient, *Ars.*, *Fer.*, *Colch.*, *Lyc.* and *Sulph.* For **glycosuria** which is apt to terminate in pulmonary phthisis, *Phosph. ac.* and not unfrequently *Plumb.* and *Argent.*, likewise *Carbo veg.* and *Phosph.*, have proved very efficient in my hands; in some cases I have derived much benefit from *Sulph.*, *Merc.* and *Aur.* as intercurrent remedies. For **milky** urine I have employed, beside *Phosph. ac.*, *Carbo veg.*, *Dulc.* and *Mur. ac.*, sometimes with good effect. For too copious a discharge of urine, without any chemical alteration of the urine itself, I have most frequently given with success, *Sulph.*, *Rhus t.*, *Natr. mur.*, *Silic.*, and, if the individual has to get up at night, *Sulph.*, *Sep.*, *Silic.*, *Arsen.*, *Natr. mur.*, *Rhus t.*, *Calc.*

## CHAPTER XVII.

## DISEASES OF THE MALE GENITAL ORGANS.

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### 1. Diseases of Single Parts.

[*For Gonorrhœa* and *Venereal Diseases*, see JAHR'S Venereal Diseases, translated by CHAS. J. HEMPLE, M.D., and published by W. RADDE, 550 Pearl St., New York.]

1. **Orthritis, inflammation of the testicles.**—If an inflammation of this kind is consequent upon suppression or mismanagement of gonorrhœa, it is in most cases speedily relieved by *Merc.* 30th, three globules in a few spoonfuls of water, of which I give a teaspoonful every three hours; if this is not sufficient, *Puls.* may be given in the same manner, and not unfrequently *Aurum; Acon.* may be resorted to if the swelling is very much inflamed and painful. If the inflammation is caused by some external injury and *Arn.* proves ineffectual, *Rhus t.* and *Puls.*, and in very chronic cases *Conium* render good service. If the inflammation of the scrotum has an **erysipelatous** character, *Bell.*, *Rhus t.*, *Ars.* and *Merc.* help in such cases. If a chronic swelling of the scrotum remains after an inflammation, and the swelling returns more or less frequently, with pain, *Nux vom.* often helps if the pains are spasmodic and choking; or *Spong.*, for crampy aching and pressing pains, with stitching and drawing pains down into the spermatic cord; and sometimes *Clematis*, if the testicle is drawn up spasmodically, with crampy pains; or *Staphys.* for burning stitches. If the chronic swelling of the testicles is more or less hard, *Aurum* very often helps, and no less *Baryt.*, *Sulph.*, *Lyc.* or *Clematis*, no matter whether these hard swellings originated in a former gonorrhœa or in some other cause.

2. **Hydrocele.**—I have effected a few cures with *Graph.* and *Rhodod.*, but in the case of adults have, upon the whole, never yet been able to make the least impression upon such a disorganiza-

tion after it had been in existence for some time. [In the case of children *Calc.* is excellent. H.]

3. **Affections of the Prostate Gland.**—If a suppressed or mismanaged gonorrhœa is followed by an inflammation of the prostate, *Nitr. ac.* 30th, three globules in water, generally helps, and is sometimes capable of removing the whole trouble without the further use of *Puls.* or *Thuja.* Chronic swellings of this gland likewise frequently yield to *Nitr. ac.*, and if suppuration sets in, *Sulph.* at suitable intervals, either before or after *Nitr. ac.*, often does good service. In a very bad case of chronic swelling and suppuration of the gland which came under my treatment, three doses of *Sulph.* 30th, two globules each, immediately effected a very favorable change; the improvement progressed visibly for three weeks, the swelling and hardness and the pus which was discharged through the urethra, diminishing all the time; after which *Nitr. ac.* advanced the improvement considerably within four weeks, so that the discharge of pus had almost ceased and only some hard places and some swelling remained; another dose of *Sulph.* removed all further trouble except a few hardnesses which yielded to *Silic.*

4. **Balanorrhœa** and **herpes pudendorum.**—Simple balanorrhœa not originating in venereal infection, is generally cured very rapidly by *Sep.* or *Nitr. ac.;* these two remedies are likewise most efficient in herpes pudendorum, provided treatment is at all required, considering that these two affections generally disappear of themselves within 8 to 10 days. If they break out again in spite of all cleanliness, and *Sep.* is not sufficient to eradicate this morbid disposition, *Sulph.* will often achieve this result. Other remedies such as *Dulc.*, *Petrol.* etc. recommended by physicians, never do the least good. [In non-venereal balanorrhœa of the worst kind the *Muriate* of *Ammonia* in watery solution, applied externally, is a capital remedy. H.]

## 2. Abnormal Sexual Functions.

1. **Nocturnal emissions, pollutions.**—If these emissions occur in the case of persons addicted to self-abuse, or in consequence of weakness of the parts, or if the sexual instinct is

very little excited, I give with the best result a few doses of *Phosph. ac.* 18th, and if this is not sufficient, *Sulph.*, *Con.* or *Sepia*, by which means I cure this weakness speedily and permanently. If the patient is at the same time troubled with erections, *Nux vom.* helps very speedily, and if this is not sufficient, I resort to, and generally with good effect, *Phosph.*, *Lyc.* or *Carbo veg.*, and likewise *Sulph.* and *Calc.* [also *Digitalin*, first or seond decimal trituration, a dose after breakfast. H.]

2. **Increased sexual passion.**—If the sexual excitement is more of a moral than a physical nature, attended with lascivious fancies and desires, I have so far derived the most benefit from *Carbo veg.*, *China*, *Calc.*, *Lyc.* and *Natr mur.*, and sometimes from *Verat. alb.* and *Hyosc.*, and if the sexual organs are more or less relaxed, from *Lyc.* and *Calc.* If the sexual excitement is more of a physical nature, with erections and excitement of the parts, *Nux vom.*, *Phosph.*, *Natr. mur.*, *Sulph.* and *Plat.* (even in the case of men) have so far proved most efficient in my hands; even *Aurum* has been very serviceable to me in such cases.

3. **Impotence, weakness of the sexual power.**—If the sexual passion is simply dormant without any real impotence, but with deficient voluntary erections, *Con.*, *Cann.*, *Lyc.* or *Calc.*, and sometimes *Natr. mur.* often afford relief. If there is complete impotence, and the erections during intercourse are too short, too weak or entirely wanting, the best remedies for such a condition are, *Lyc.*, *Sulph.*, *Ignat.*, likewise *Calc.*, *Cannab.*, *Conium* and *Caladium*, especially if the individual is at the same time troubled with lascivious fancies.

4. **Consequences of onanism.**—Provided the patient is willing to abandon his vile habit, these consequences mostly yield to *Nux v.*, *Sulph.* and *Calc.;* and if nocturnal emissions remain which do not yield to *Sulph.* and *Calc.*, the best remedies are, *Phosph. ac.*, *Conium* and *Sepia.*

## CHAPTER XVIII.

## DISEASES OF THE FEMALE ORGANS AND THEIR FUNCTIONS.

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### 1. Menses, Catamenia.

1. **Absent menses, menostasia.**—If in the case of young girls the menses delay their first appearance, *Puls.* does much good, especially if in the place of the menses a leucorrhœal discharge sets in, and the patient looks pale and is troubled with determination of blood to the chest; in such circumstances *Sep.* sometimes proves still more effective, although I never like to resort to *Sep.* until *Puls.*, which often acts more speedily, is found wanting. If instead of an anæmic condition which is adapted to these two remedies, a state of plethora prevails, I first give *Bry.* instead of *Puls.*, more particularly if this condition is accompanied by rush of blood to the head and frequent nose-bleed, and in the place of *Sep.*, I give *Calc.;* by pursuing this course I often accomplish my end with tolerable speed, although I have had cases that could only be brought round by means of *Kali carb.*, some that were successfully managed by *Bell.*, others by *Acon.* and others again by *Lyc.*

2. **Insufficient, too short and too scanty menses.**—Here too, if the blood is at the same time very pale, not only *Puls.* does much good, but likewise *Graph.* and *Carbo veg.*, and above all *Sulph.* If this condition is accompanied by abdominal cramps and leucorrhœa, and *Puls.* does not adequately relieve this condition, *Cocc.* is often found indispensable. Beside these remedies, others that are found efficacious in absent menses, likewise help, more especially *Sep.* and *Kali carb.*, likewise *Phosph.*, *Alumin.*, *Amm. carb.* and *Caust.* or likewise *Natr. mur.*, more particularly if the scanty menses are attended with melancholy and sadness; and *Silic.* if the scanty menses appear at the same

time prematurely. [For scanty menses with painful cramps in the bowels *Caulophyllin* is eminently useful. H.]

3. Extremely **profuse and too frequent menses.**—If the menses at the same time set in prematurely, one of the best remedies is *Nux vom.*, and very frequently *Plat.* and *Carbo veg.*, or perhaps *Cham.*, more particularly if the menstrual discharge is accompanied by pains in the small of the back and the blood is thick and lumpy. If the menses are not only profuse, but last too long, *Ipecac.* often proves effectual, likewise *Ignat.*, especially if the appearance of the menses is associated with abdominal spasms, and if the menses appear prematurely, *Bry.*, *Lyc.* or *Phosph.* For profuse menses the following remedies have likewise been found useful: *Carbo veg.*, *Natr. mur.*, *Calc.*, *Verat. alb.*, *Fer.* and *Sabina*, and sometimes *Bell.* and *Hyosc.*

4. **Suppression of the menses, amenorrhœa.**—If the suppression took place in consequence of fright and if a remedy can be administered without loss of time, *Acon.* often restores the menses very speedily, likewise *Plat.* or *Puls.;* if the suppression had lasted for some time, *Lyc.* is the best remedy. If a fit of chagrin had caused the suppression, *Acon.* or *Plat.* may be given; if a cold, *Puls.* or *Sep.*, *Sulph.*, *Dulc.* and *Nux mosch.* Efficacious remedies are likewise, *Silic.*, *Bry.* (especially if nose-bleed takes the place of the menses), likewise *Con.*, *Kali carb.*, *Graph.*, *Calc.* and *Bell.*

5. **Painful menses, menstrual spasms, dysmenorrhœa.**—The most efficient remedies for the abdominal spasms are: *Cocc.*, *Ign.*, *Puls.*, *Cupr.*, and occasionally *Cham.*, *Coff.* and *Secale;* *Cocc.* and *Cupr.* more particularly if the flow itself is scanty; *Ignat.* and *Cham.* if it is too profuse; *Coff.* and *Secale* if it is attended with twitching of the limbs, tossing about, cries and anxiety; *Cupr.*, if the spasms which extort cries, are accompanied by retching and vomiting. Beside these remedies, relief is afforded by *Amm. carb.* for bearing-down on the sexual organs and a tearing distress in the small of the back; *Amm. mur.* for pressing-contractive abdominal spasms with vomiting and diarrhœa; *Bell.*, for labor-like pains in the small of the back and a severe bearing-down pressure on the uterus in the case of profusely-menstruating

females; *Nux vom.*, for cramps and other troubles setting in after premature and profuse menses; in general, for menstrual cramps, beside the above-mentioned remedies, if the menses are scanty, *Puls.*, *Cocc.*, *Cupr.*, *Sep.*, *Caust.*, *Graph.*, *Con.;* if profuse, *Plat.*, *Ignat.*, *Cham.*, *Coff.*, *Secale*, *Natr. mur.*, *Natr. carb.*, *Bell.* [One of the most efficient remedies for difficult and painful menstruation is *Caulophyllin.* H.]

## 2. Discharges from the Parts.

1. **Metrorrhagia,** uterine hæmorrhage.—If no other remedy is specially indicated, and the loss of blood amounts to a real hæmorrhage, the first remedy I make use of, is always *Ipecac.*, which arrests the flow of blood in very many cases; if it is not sufficient and the hæmorrhage is very severe, I resort to *Secale*, and if this does not afford speedy relief, to *China;* I employ the last-mentioned remedy at once if the patient had become very weak in consequence of the loss of blood. I have not yet had a single case of metrorrhagia in which these three remedies did not so far modify the symptoms as to allow me time to look for other more specially indicated remedies. In many cases a few pellets of the appropriate remedy dry on the tongue were sufficient to perceptibly diminish the flow of blood until it gradually ceased; it is only if the hæmorrhage is associated with general spasms that I at once resort to *Hyosc.;* if the hæmorrhage is of a **chronic** nature, I give in the case of women who had not been long confined, *Bell.*, *Sabina* or *Sep.*, and if these remedies are not sufficient and no other remedies are specially indicated, I resort to *Secale*, *China* or *Fer.* According to special indications, if there is considerable **pressing** towards the genital organs, I give *Bell.*, *Sabina*, *Plat.* or *Sec.;* for severe pains in the **small of the back,** *Bell.*, *Plat.*, *Ipec.*, *Secale*, *Crocus*, *China*, *Fer.*, *Rhus;* for **labor-like** pains, *Sabina*, *Secale*, *Plat.*, *Puls.*, *Croc.*, *Hyosc.*, *Fer.;* if attended with general **spasms** and febrile excitement and delirium, *Hyosc.;* if the blood is **black, lumpy,** especially, *Croc.*, *Fer.*, *China*, *Cham.*, *Puls.*, *Lyc.*, *Sabina;* if **dark** and fluid, *Bry.*, *Plat.*, *Secale;* if **bright-red,** *Ipec.*, *Bell.*, *Calc.*, *Lyc.;* if **badly-smelling,** *Sec.*, *Cham.*, *Bell.*, *Crocus.* [*Cimicifuga*, *Trillium*, *Erigeron*, an infusion of cinnamon acidulated

with dilute sulphuric acid, are eminently useful in metrorrhagia. H.] If metrorrhagia sets in during pregnancy and there is danger of miscarriage, and *Ipec.* and *Sec.* are not sufficient, I give *Cham.* or *Arn.*, and if these do not help soon, I prescribe according to circumstances, *Plat.*, *Sabin.*, *Puls.*, *Sep.* or *Fer.;* in most cases *Ipec.* or *Secale* is sufficient; [also *Acon.* and *Hamamelis.* H.] If such hæmorrhages set in during confinement, no matter whether after natural labor or miscarriage, I likewise first give *Ipec.*, and if this is not sufficient, *Sec.*, *Sabina*, *Plat.*, *China* or *Fer.*, provided *Cham.*, *Lyc.*, *Hyosc.* or *Bell.* are not more specially indicated.

2. **Leucorrhœa.**—It is a real misfortune that even homœopaths have classed every discharge from the vagina that does not look red, under the general name of leucorrhœa or whites, without caring whether the discharge originates in a purely catarrhal affection of the uterus or vagina, or proceeds from entirely different causes, such as herpetic, carcinomatous or even hidden syphilitic ulcers or inflammations. If the remedies which have hitherto proved efficient for leucorrhœa in the hands of homœopathic physicians, are to be limited in their curative range to remedies for **catarrh** of the **uterus** and **vagina,** a few only of the thirty remedies which we find enumerated in Rueckert, would remain that can be recommended to the beginner in homœopathy as most frequently and most reliably curative. I am only acquainted with few remedies that have been found efficacious in catarrhal leucorrhœa, such as: *Puls.*, *Sepia*, *Sulph.*, *Calc.*, *Cocc.*, *Graph.*, *Lyc.* and *Silic.* What has been stated by some observers concerning *Acon.*, *Iodine*, *Kreas.*, *Baryt.*, *Carbo anim.* and *Carbo veg.*, *Hep.*, *Kali carb.*, *Mez.*, *Kali*, *Phosph.*, *Plat.*, *Ruta*, *Tongo* etc., I have not yet been able to subject to confirmatory trials at the sick-bed; it is likewise my opinion that a beginning practitioner will do well to depend upon the few but reliable data which I here furnish him in accordance with my own observations and clinical trials. If no special indications point to some other remedy and the patient is anæmic, with scanty menses, I commence the treatment of every mild, purely catarrhal leucorrhœa with *Puls.*, after which, according to circumstances, I give *Sulph.* or *Sepia*, and if these do not prove sufficient, I select among the following: *Cocc.*, *Calc.*, *Graph.*, *Lyc.*, *Silic.* and *Magnes. mur.*, more particularly if the discharge seems to proceed from the vagina rather than from the uterus. If the

uterus itself is invaded, I have had good success with *Amm. carb.*, *Cocc.*, *Lyc.*, *Magnes. mur.*, *Natr. mur.*, *Sep.*, *Silic.;* again if the irritation of the mucous lining is rather inflammatory than purely catarrhal, and the secretion is watery, I depend upon *Amm. carb.*, *Sep.*, *Cocc.*, *Graph.*, *Puls.*, *Alum.;* for herpetic, corrosive leucorrhœa, *Merc.*, *Amm. carb.*, *Natr. carb.*, *Nitr. ac.*, *Hep.*, *Con.*, *Calc.*, *Silic.*, *Natr. mur.*, *Sulph.;* for **milky** leucorrhœa, *Calc.*, *Puls.*, *Silic.;* for a **thick** white-slimy leucorrhœa, *Calc.*, *Puls.*, *Sep.*, *Natr. mur.;* for yellow-slimy, *Sep.*, *Lyc.;* for **foul-smelling** leucorrhœa, *Natr. carb.*, *Nitr. ac.;* if the leucorrhœa is attended with **colic** or **abdominal cramps**, *Magnes. carb.*, *Ignat.*, *Lyc.*, *Natr. mur.*, *Merc.*, *Merc. mur.*, *Sep.*, *Cocc.*, *Conium;* with a good deal of **itching** in the genital organs, *Sep.*, *Calc.*, *Sulph.*, *Carbo veg.*, *Conium*, *Natr. mur.*, *Silic.* If the leucorrhœa **precedes** the menses, *Calc.*, *Phosph.*, *Graph.*, *Carbo veg.*, *China*, *Sep.*, *Puls.;* if it **succeeds** the menses, *Puls.*, *Alum.*, *Graph.*, *Silic.*, *Ruta*, *Calc.*

### 3. Various Local Affections.

1. **Metritis,** inflammation of the uterus.—If acute, and no other remedy is distinctly indicated, the first remedy I resort to in every case, is *Bell.* which is in most cases sufficient to complete the cure; only in cases where the fever is exceedingly intense, I first give *Acon.* for 24 hours. If the inflammation is rather chronic and *Bell.* has no effect, I give *Sep.*, *Puls.*, *Rhus t.*, *Cocc.*, *Magnes. mur.* or *Lyc.* If putrefaction or gangrene threatens, and *Arsen.* seems ineffectual, the best remedy is *Secale corn.* first recommended by Gross. I have witnessed the splendid powers of this agent in a desperate case where a woman 28 years old had miscarried three times and the fourth time carried her child the full term after I had already given up her case as hopeless; and in another no less dangerous case, where a woman of 38 years, who had produced a miscarriage on herself six times in succession by injecting soap-suds into the uterus, and who, after her last miscarriage, was attacked with putrefaction of this organ in a horrid degree, with a brown, cadaverously-smelling discharge from the vagina, excessive restlessness and prostration, delirium, sopor and fever with an intermittent type.

2. **Prolapsus, induration, ulcers** and **carcinoma of the uterus.**—For prolapsus of the womb my most efficient remedies so far have been *Bell.*, *Sep.*, *Plat.*, and in recent cases, especially after lifting, reaching high etc. *Nux vom.;* when caused by reaching high, more particularly *Sulph.* or *Aur.* If prolapsus sets in after a hard confinement, and prematurely leaving the bed, and both *Bell.*, and *Nux v.* remain ineffectual, *Sec.* will be found efficient in many cases. Very often prolapsus is complicated with chronic swelling and induration of the uterus, in which case *Aurum*, *Bell.* and *Sep.* prove the best remedies, likewise *Carbo an.* which, in cases where it is indicated, is more efficient in the 30th attenuation than when taken in substance. I will state here as a remarkable fact that I have cured three patients living in remote localities, of hard swellings of the fundus of the uterus, which had not only been diagnosed as such by the physicians of the place but by Paris Professors; one was cured by means of *Sep.* and two others by means of *Aur.* and *Bell.*, the cure being so complete that not a trace of the swellings could afterwards be discovered by their former physicians. These three women, respectively from 40 to 50 years old, six to nine months after my treatment, succumbed to hydrothorax which, owing to the distance, I was unable to take charge of. What *Graph.* and *Kreas.* recommended by Wahle for the wart-shaped and cauliflower-excrescences on the neck of the uterus, are capable of accomplishing in these affections, has become evident to me in more than one case; as far as *Thuja*, which is likewise recommended for these excrescences, is concerned, I have never derived the least benefit from it, and I advise homœopathic beginners not to lose their time with ineffectual experiments with this drug. On the other hand *Thuja* and *Nitr. ac.* have an excellent effect in the flat ulcers at the os tincæ and on the neck of the womb which are of frequent occurrence at least among us here in Paris, and resemble ulcerated aphthæ, several of which I have cured with these two remedies and likewise with *Sep.*, but most of them with *Nitr. ac.* Whether the genuine glandular carcinoma, and the scirrhus which sometimes precedes it, can be cured be means of *Magnes. mur.* or *Sabina*, and open cancer by *Arsen.*, I am unable to say; all I can say is that I have often tried every imaginable medicine for the last-mentioned disorganization, without having been able to accomplish any thing more than a mitigation of some tormenting incidental symptoms.

[Hydrastis is said to have cured cancer; I have had but moderate success with it; Galium aperinum is likewise recommended. H.]

3. **Ovarian Affections.**—What other observers have stated regarding the curative virtues of *Bry.* and *Coloc.* in inflammations of these organs, I am able to confirm; I only wish to add that in most cases *Bry.* has been sufficient to complete a cure, and that only in a very few cases I have had to resort to *Coloc.* in addition to *Bry.*, and then only in cases where the patient was tormented by an intolerable colic. In rather chronic ovarian pains I now not only use with success as before, *Bell.*, *Merc.*, *Plat.*, *Laches.* and *Con.*, but likewise *Apis* in many cases.

4. **External pudendum.**—A more or less inflammatory swelling of the labia majora, if not very intense, generally yields to a single dose of *Sep.* 30th, two globules, and if acute, and threatening to suppurate, to a single dose of *Merc.* If the labia become sore and there is more or less swelling and suppuration, *Sulph.*, *Calc.* or *Silic.* help, provided *Sep.* and *Merc.* are not sufficient. For the **itching** of the pudendum, I have so far derived most benefit from *Sulph.*, *Calc.*, *Carbo veg.*, *Con.*, *Lyc.*, *Kali carb.*, *Sep.* and *Silic.* [also, if there is much congestion, *Bell.;* a very weak wash of the Sulphite of Soda is excellent. H.]

5. **Diseases of the Breasts.**—There is a species of hard nodes in the breasts which are very painful, the pains being sometimes lancing; it is sometimes very difficult to distinguish them from schirrous tumors, except when they effect young persons between the ages of 20 and 30 years where no schirrous degenerations occur. These tumors, which have been first described by Velpeau under the name of neuralgic nodes and sometimes continue unchanged for years even to the age of 80 and to the last breath, have undoubtedly often been described as schirrus of the mammary glands, whereas the tumors were really these neuralgic nodes which have occurred in my practice from the size of a pigeon-egg to that of a small peach, and have uniformly yielded to *Calc.*, *Cham.*, *Bell.*, *Lyc.* or *Phosph.* [also to *Acon.* and *Iodine.* H.] I cannot say whether true schirrous indurations which sometimes develop themselves during the critical age, can be cured. It is true that those that have come to me for treatment, were far

advanced. *Conium*, and sometimes *Carbo an.* and even *Silic.*, but *Bry.* more than any other remedy, effected some improvement, but no medicine was able to ward off the ultimate termination in open cancer and the miserable end of the patient. I remember however one single cure of open cancer, which is all the more remarkable as the undoubted and surely progressing cure of the present Prussian ambassador at the Court of Paris, Count Golz, constitutes a parallel to the former case. This case was that of the wife of a merchant of Smyrna, who had resided for some time in Paris in order to have a mammary cancer treated homœopathically, and who afterwards, on finding that the cancer commenced to discharge, returned to her husband, and two years afterwards showed herself to me completely cured, the locality of the schirrus exhibiting red cicatrices resembling those of the cervical glands that had suppurated. She had never had the least idea of submitting to an operation, but had entrusted her case to an oriental quack who, among a mass of internal preparations, had one day strapped a live toad on the schirrus, which was found dead on the day following, after which the breast commenced to discharge pus like any other abscess, and after the hardness had finally been removed by suppuration and under the use of other preparations unknown to her, the breast had healed by cicatrization. I never have been able to learn either the name or species of this toad, and hence never have been able to prescribe this vermin homœopathically, which otherwise might have proved a brilliant addition to our Materia Medica. Whatever may be said in favor of *Bell.*, *Carbo an.*, *Graph.*, *Clemat.*, *Hepar*, *Laches.* and *Kreas.* in the treatment of mammary schirrus, *Bell.* and *Carbo veg.* are really the only remedies that have any power in this direction, and then only for indurated *milky nodosities* and simple *inflammatory indurations;* the other remedies here named do not even cure the latter. What Dr. Fielitz relates of the improvement obtained by *Ars.* in a case of open mammary cancer, has been corroborated in my own practice not only of *Ars.*, but likewise of *Silic.*, although the final result was the same as in Fielitz' case; my cases fared even worse, for after cicatrization had been established, the schirrus again broke and the carcinomatous toxication of the blood henceforth progressed with fearful rapidity.

### 4. Characteristic General Female Diseases.

1. **Chlorosis.**—It is a pity that most of Rueckert's observers have lost themselves in theoretical speculations concerning the essence of chlorosis and in hypothetical suggestions regarding remedial agents rather than to turn their attention to the investigation of special indications which might secure for this or that remedy a preference over another. Even where symptoms are mentioned, they are mostly such as occur in every case of chlorosis, so that, if the theoretical remarks are left out, very few reliable indications for the selection of a remedy and such as are based upon experience, remain, and we find ourselves reduced to the most general propositions which, in fact, amount to nothing at all. Fortunately there are but few and at the same time very effective remedies that here present themselves for our consideration, so that, inasmuch as the nature of chlorosis is such as to allow the physician time to search for the suitable remedy, no great harm is done to the patient even if she is only restored to health by the remedy selected, at the end of the treatment. So far I have never seen a decided cure effected by one single remedy, but have had to use several of them, among which I have found the following particularly efficient: *Puls.*, *Sulph.*, *Calc.*, *Sep.*, *Graph.*, *Phosph.* and *Natr. mur.* If no special indications prevail, I commence the treatment with *Puls.;* if this remedy neither ameliorates the menses until the next turn, nor improves the looks of the patients, I resort to *Sulph.*, after which I give *Calc.;* in very many cases these three remedies are sufficient to bring about a blooming state of health. If they are not sufficient, or if some of the former ailments remain after their use, I have recourse, according to circumstances, to *Sep.*, *Phosph.* or *Graph.* and sometimes to *Plumb.* or *Natr. mur.* Small doses of *Fer.* have not had the least effect in my hands in this disease, nor have I succeeded better with this agent than allopathic physicians, except that if my patients still remained as chlorotic after using my Ferrum as their patients did after using pounds of the allopathic Iron, my patients at least remained free from the dyspnœa, the palpitation of the heart and the extreme debility which allopathic patients generally retain as the sole results of the so-called ferrugineous preparations. If chlorotic patients of this kind come to me from the enemy's camp, I generally commence

my treatment with *Puls.*, after which I very often give *Plumb.* with the best result, and then very frequently follow up with *Sulph.* or *Phosph.* Regarding *special indications*, if much **headache** and **vertigo** are complained of, I give more especially *Calc.* and *Sep.;* if **buzzing** in the head or ears, *Puls., Sep.;* if the face looks pale and **jaundiced**, *Sep.;* if of frequent **vomiting**, *Puls., Sulph., Calc., Phosph.;* if of **distress at the stomach**, cardialgia, *Puls., Sulph., Calc.;* of **diarrhœa**, *Puls., Sulph., Calc.;* obstinate **constipation**, *Plumb., Sep., Calc., Lyc.;* of **pressing** in the lower abdomen as if the menses would make their appearance, but which do not come on, *Puls., Sepia, Natr. mur.;* if of profuse **leucorrhœa**, especially, *Puls., Sulph., Sep., Carbo veg.;* of dyspnœa, *Puls., Sulph., Calc., Phosph., Sepia;* of **palpitation**, especially, *Puls., Calc., Sep., Plumb., Sulph., Natr. mur.;* of great **weariness**, heaviness of the lower extremities, *Puls., Calc., Plumb., Lyc., Natr. mur.;* **swelling** of the **feet**, œdema of the lower limbs, *Plumb., Sulph.;* **chilliness**, *Puls., Calc., Sep., Sulph.*

2. **Hysteria.**—It is incredible what a multitude of the most diversified diseases can be simulated by this proteus of nervous dissonances which an inexperienced practitioner may easily mistake for dangerous disturbances, whereas they are in reality nothing but nervous phenomena without any material reality. We not only meet with hysteric disturbances of the emotive and mental range, but with apparent epilepsies, paralysis, apoplexy with sopor, whooping-cough and other paroxysms of the worst kind; the hysteric phenomena may break forth with a surprising suddenness; they may frighten not only the family, but even the physician, and, whereas we expect to see the patient expire, may disappear like a dream as suddenly as they came without leaving a trace behind them. I have known hysteric women, whose lower and upper extremities remained paralyzed for weeks and even months, they were lying in bed almost motionless, exhibiting all the symptoms of an organic disease of the spinal cord, including a sensitiveness of the vertebral column to hard pressure and a sensation as if the body were encircled with a hoop, in such a deceptive manner that every physician who saw them for the first time, was tempted to diagnose a spinal disease, and I should have been tempted to do the same thing if I had not been acquainted with these patients for some time, and had not remained in doubt

in consequence of the sudden development of the disease to the above-mentioned height, accompanied by an unchanging rotundity of form, fresh complexion and a persistent correctness of the senses; and if moreover certain aberrations of the appetite, and an absolute insensibility of some portions of the skin and an excess of sensibility of other portions had not suggested the existence of purely hysterical paralytic conditions which, in one case, suddenly yielded to *Ignat.*, that had been prescribed for other ailments; in another case to *Caust.*, and in a third case to *Cicuta.* Whether a physician ought to delude himself with the hope of ever effecting a perfect cure of hysteria, may seem unreasonable; all that he can expect to accomplish is to combat the existing phenomena with the best means at his command, namely with medicines that correspond most specifically with nervous dissonances. Such medicines are especially, *Ignat.*, *Mosch.*, *Nux mosch.*, *Sil.*, *Caust.*, *Cicuta*, *Conium*, *Phosph.*, *Cham.*, *Cocc.*, *Puls.*, *Verat. alb.*, *Sepia*, *Coff.*, *Ipecac.*, *Crocus*, *Bell.*, *Nux vom.*, *Sulph.*, [also *Acon.* H.] Among these medicines I have derived the most benefit from *Sil.*, *Verat. alb.*, *Conium*, *Ignat.*, *Aur.*, *Phosph.*, for hysteric **affections of the emotive sphere,** more especially in cases of **melancholy** with a good deal of weeping and sadness, from *Aur.*, *Bell.*, *Plat.*, *Verat. alb.*, and in cases of extreme **nervous excitability** from *Bell.*, *Croc.*, *Acon.*, *Phosph.*, *Veratr. alb.*, *Hyosc.*, *Valer.*, *Mosch.*, *Coff.;* for attacks of **vertigo,** from *Phosph.*, *Acon.*, *Con.*, *Aur.*, *Mosch.;* for hysteric **headache,** from *Ignat.*, *Coff.*, *Nux mosch.*, *Rhus t.*, *Aur.*, *Plat.*, *Mosch.*, *Sepia;* especially when attended with a feeling of **coldness** on the vertex, from *Calc.*, *Verat. alb.;* for **pharyngeal spasms,** with danger of suffocation, from *Hyosc.*, *Bell.*, *Ignat.*, *Nux v.*, *Cocc.*, *Magnes. carb.;* for a **ball** ascending in the throat or head, from *Acon.*, *Ign.*, *Con.*, *Cicuta*, *Valer.;* for **cardialgic spasms,** from *Ign.*, *Cham.*, *Cocc.*, *Magnes. carb.*, *Nux v.;* for **abdominal spasms,** from *Ignat.*, *Ipec.*, *Cocc.*, *Nux vom.;* for **spasms** of the **bladder** and urinary **difficulties,** from *Puls.*, *Sep.*, *Asafœtida*, *Bell.*, *Nux v.;* for **uterine spasms,** from *Ign.*, *Cocc.*, *Magnes. mur.*, *Cicuta*, *Con.*, *Sep.*, *Plat.;* for hysteric **hoarseness** and aphonia, from *Caust.*, *Plat.*, *Bell.*, *Hyosc.;* for **spasmodic** cough, from *Ign.*, *Mosch.*, *Bell.*, *Hyosc.*, *Phosph.*, *Puls.*, *Coff.*, *Acon.*, *Nux vom.;* for hysteric **asthma** and spasms of the lungs, from *Ignat.*, *Sep.*, *Cupr.*, *Mosch*, *Puls.*, *Ipec.;* for **cardiac spasms,** from *Cham.*, *Cocc.*, *Acon.*, *Puls*, *Aur.*, *Conium;* for **pains** in **the back,** small of the back, from *Nux vom.*, *Ignat.*, *Cupr.*, *Bell.*, *Sulph.;* for **weariness,**

lassitude, fainting fits, from *Sep.*, *Mosch.*, *Ipec.*, *Ignat.*, *Cham.*, *Nux mosch.*, *Acon.;* for **apoplectic sopor,** from *Ipec.*, *Bell.*, *Opium*, *Tart. emet.*, *Laches.;* for general **spasms** and convulsions, from *Ipec.*, *Ign.*, *Cic.*, *Cocc.*, *Cupr.*, *Caust.*, *Mosch.*, *Hyosc.*, *Cham.*, *Nux vom.;* for **tetanic spasms,** from *Ipec.*, *Nux v.*, *Cham.*, *Nux mosch.*, *Mosch.;* for hysteric **paralysis** of one extremity or of all of them, from *Caust.*, *Cic.*, *Cocc.*, *Ign. Rhus t.*

## CHAPTER XIX.

## COMPLAINTS OF PREGNANT, PARTURIENT, LYING-IN AND NURSING FEMALES AND THEIR INFANTS.

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### 1. Ailments incident to Pregnancy.

NOTE.—Where the remedy alone is mentioned without any particulars as to dose, a single dose of two pellets of the thirtieth attenuation is meant in this section as well as in the rest of the work.

1. **Gastric Difficulties.**—For the *loss of appetite*, which is sometimes associated with the strongest longings, *Sulph.* is most frequently the most efficient remedy, likewise the remedies in Chap. XI. Nos. 1–3. For **nausea** the best remedy is undoubtedly *Ipec.* or *Nux vom.*, and sometimes *Acon.*, *Arsen.*, *Puls.*, *Magn. mur.;* if **vomiting** supervenes and *Ipecac.* and *Nux vom.* are insufficient, a single dose of *Sulph.* almost always helps very soon, likewise *Sep.*, and sometimes, but less frequently, *Cham.*, *Ars.*, *Fer.*, *Acon.*, *Secale* or *Hyosc.;* for vomiting of **mucus,** *Ipec.*, *Acon.*, *Arsen.*, *Puls.* or *Sulph.*, and if the **ingesta** are vomited up again, *Sulph.*, *Nux v.*, *Ipec.*, *Sep.*, *Fer.*, *Phosph.;* for vomiting of **milky** mucus, *Sep.;* if **colic** sets in, it is most generally relieved by *Cham.* or *Nux vom.*, and occasionally by *Coloc.*, *Bell.*, *Puls.*, *Sep.* or *Bry.*, according to the particular indications given in Chap. XIV. 2, 8. **Diarrhœa,** is most frequently relieved by *Cham.* or *Puls.*, and very often by *Sep.*, *Ant. cr.*, *Phosph.*, *Petrol.*, according to the indications given in Chap. XV. 1, 10, and if none of these remedies help, *Sulph.* often arrests the trouble very speedily. Obstinate **constipation** is often relieved by *Bry.* or *Nux vom.*, and not unfrequently by *Sep.*, *Lyc.*, *Alum.* or *Sulph.*

2. **Disturbances of the Circulation.**—If *Acon.* does not relieve a rush of blood to the head, *Bell.* or *Nux vom.* may be given. If the congestions are chiefly located in the abdomen,

with a feeling of heaviness and painful tension in the lower abdomen, frequent urging to urinate and lassitude in the limbs, the most efficient remedy is *Bell.* and sometimes *Nux vom.* If the blood is determined *to the chest*, with palpitation of the heart, and *Acon.* is not sufficient, *Puls.* will relieve the case, and sometimes *Lyc.*, *Sulph.*, *Sep.*, *China*, *Spig.*, *Natr. mur.* For **syncope** arising from the disturbed circulation, one of the most efficient remedies is *Ignat.* or *Ipec.*, *Cham.* or *Nux v.*, and for general **plethora**, *Acon.* or *Bell.*, according to the special indications given in Chap. XXV. under **Syncope** or **Fainting.** The worst accidents are the **uterine hæmorrhages** which, however, yield very speedily to *Ipec.* or *Secale*, and sometimes, especially if miscarriage is impending and these two remedies have no effect, to *Plat.*, *Sabina*, *Cham.*, *Crocus*, or to *Bell.*, *Hyosc.*, *China*, *Bry.*, according to the indications given in Chap. XVIII. 2, 1, [also Hamamelis and Trillium. H.] Other hæmorrhages, such as **nose-bleed,** are relieved by *Acon.*, *Bry.*, *China* or *Bell.*, according to the indications given in Chap. X.; **hæmoptysis** by *Acon.*, *Ipec.*, *Fer.* or *Arn.;* **hæmatemesis** by *Ipec.*, *Arn.*, *Fer.*, *Sulph.* or *Acon.* The best remedies for supervening hæmorrhoids are, *Puls.* or *Nux v.*, and sometimes, *Arsen.*, *Carbo veg.* and *Natr. mur.* and for **varicose veins,** *Puls.*, *Carbo veg.*, *Arn.*, *Lyc.*, *Sulph.* and *Silic.* **Œdema** of the feet and legs which sometimes extends to the thighs, is generally very soon removed by *Bry.* one or two doses, and if this is not sufficient, by *Sulph.;* œdema **of the labia** yields to *Sep.* or *Merc.*

3. **Difficulties of the Respiration and Cough.**— The dyspnœa of pregnant females which is especially troublesome after a meal, if accompanied by a good deal of **rush of blood to the head,** yields mostly to *Nux vom.*, and if complicated with a good deal of flatulence and bloat of the abdomen, to *China;* and to *Acon.* in all cases where the dyspnœa is attended with general plethora, **palpitation of the heart,** flushed face and great anxiety; to *Arsen.*, if attended with great weakness, pallor and bloat of the face and swelling of the feet; to *Puls.*, if attended with weak stomach, bitter taste in the mouth and waterbrash; to *Ipec.*, if a disposition to vomit, paleness of the face and faint feeling supervene. The **cough** of pregnant women is most generally relieved by *Acon.* 30th, three globules dissolved in a few spoonfuls of water, or by *Sep.*, and sometimes by *Bell.*, *Nux vom.*, *Ipec.*, *Puls.*,

or even by *Con.*, *Dulc.*, *Caust.*, *Natr. mur.* or *Phosph.*, according to the indications in Chap. XX. 2, under **Cough.**

4. **Urinary Difficulties.**—Pregnant females are often tormented by an **ineffectual urging** to urinate which is almost certainly relieved by *Puls.*, so that other remedies, such as *Cocc.*, *Nux vom.*, *Phosph. ac.*, *Sulph.* or *Con.*, will scarcely ever have to be used. For the **retention of urine,** *Puls.* is likewise often very useful, unless *Camph.* 30th, three globules should have relieved the trouble previously; *Acon.* and *Nux v.* are likewise sometimes indicated. If, as soon as an urging to urinate is experienced, the urine spirts out too suddenly and almost **involuntarily,** and *Puls.* and *Sep.* do not relieve this weakness, *Acon.* or *Bell.* will often accomplish this result, likewise *Natr. mur.*, *Caust.* or *Phosph.*, if the urine spirts out involuntarily during a fit of cough.

5. **Pains.**—If they are severe, such as **toothache,** relief is frequently obtained by olfaction, *Sep.* being the first remedy, next to which we have *Cham.*, *Puls.*, *Coff.*, *Nux vom.*, *Acon.*, *Bell.*, *Hyosc.* or *Staphys.*, and *Magnes carb.*, according to the indications in Chap. VIII. The pains in the **breasts** are mostly relieved by *Bry.* or *Bell.*, and sometimes by *Sep.*, *Nux vom.*, *Aur.* or *Sec.* The pains in the **small of the back** by *Nux v.*, *Puls.* or by *Bell.*, *Rhus t.* or *Arn.* The **stitches** in the sides of the abdominal integuments by *Nux v.*, *Bell.*, *Bry.*, *Arn.*, *Puls.;* and the labor-like pains which sometimes begin to be felt at seven months, by *Puls.*, *Nux v.* or *Coff.;* and sometimes by *Cham.*, *Bell.*, *Hyosc.*, *Sep.* or *Nux mosch.*

6. **Nervous Derangements.**—One of the most frequent is the **sleeplessness** of pregnant females, which however soon yields to *Coff.* and *Bell.*, and in other cases to *Acon.* or *Sulph.* The **dread of death** or the apprehension of dying during confinement which haunts many pregnant females like a nightmare, yields very rapidly to a dose of *Acon.* 30th, two globules, which may be repeated if necessary. **Convulsions** during pregnancy are less frequent, but so much more dangerous since they may lead to miscarriage; *Bell.* is a very reliable remedy in such cases, likewise *Cham.* and *Ign.*, or, if blood is at the same time discharged from the womb, *Ipec.* and *Hyosc.* [*Gelseminum* is an excellent remedy for eclampsia of pregnant or parturient females. H.]

7. **Cutaneous affections.**—Affections of this kind, most generally consisting of brown or dingy-yellow spots in the face, find their chief remedy in *Sep.*, although in some cases *Lyc.*, *Ant. cr.* or *Sulph.*, are required for their complete removal. I must warn however against washing with *Arn.* which has been recommended by some for the cracks in the skin of the abdomen which sometimes show themselves towards the end of the seventh month. I have seen very unpleasant effects arise from such washes, and advise frictions with the oil of **sweet almonds.**

8. **Local affections of the Genital Organs.**—I do not know whether the uterus during pregnancy can be locally inflamed as some pathologists assert; I have never seen such a case. **Dropsy** of the uterus occasioned by an excessive accumulation of the amniotic fluid, is not an uncommon event. This accumulation distends the womb and the abdomen and may endanger the child's life which must inevitably perish if the fluid is expelled from the womb. I have met with such a case only once. A woman had already lost three children in this manner and when the fourth bade fair to perish from a similar cause, she applied to me for help. This condition which had already become associated with swelling of the feet, legs and hands, yielded to three doses of *Sulph.*, a dose every other day. The **swelling** of the **labia** which not unfrequently occurs in the case of pregnant females, yields to *Sep.* or *Merc.*

9. **Threatening miscarriage.**—If the discharge of blood is very profuse, *Ipec.*, *Arn.*, *Sec.* or *Sabina* often avert the danger, and sometimes *Cham.* or *Puls.;* and if convulsions are present, *Ipec.*, *Hyosc.*, *Plat.*, *Cham.* or *Secale.* As regards the treatment after miscarriage has taken place, no other remedies are required except those that are indicated in Art. 3, for the affections of lying-in women.

## 2. Ailments incident to Labor.

1. **Labor-pains.**—For the so-called **spurious** labor-pains during which the os tincæ remains soft and tightly closed, as well as for the **suspension** of the pains during labor, *Puls.* or *Secale* almost always helps, and likewise sometimes *Bell.*, *Opium* or *Cham.*

If the pains are **spasmodic,** *Bell.* is the most efficient remedy, and if they are **too violent** and exceedingly painful, *Coff.*, *Cham.*, *Nux v.* or *Bell.*, and likewise *Acon.*, more especially if the parturient female is haunted by an apprehension of dying. But if, as is sometimes the case, labor is rendered difficult or distressing in consequence of torpor and tardy dilatation or extreme sensitiveness of the vagina, the most suitable remedies for the former difficulty are *Puls.* and *Sec.*, and for the latter *Coff.* and *Nux v.* What *Puls.* and *Sec.* are capable of accomplishing in expelling a fetus that had already been dead for one or two weeks; and what *Puls.* can do towards correcting the wrong positions occasioned by uterine spasms, has become evident to me by more than one brilliant example.

2. **Particular accidents.**—For the fainting turns which always constitute a very bad symptom during labor, *Acon.*, *Ign.* or *Cham.* are mostly sufficient, and sometimes *Coff.*, *Verat. alb.*, *Puls.*, or *Sec.;* and for the **convulsions** of parturient women, *Ign.*, *Cham.*, *Bell.*, *Hyosc.*, *Ipec.* or *Plat.*, *Acon.* or *Coff.*, according to the indications for spasms in Chap. XXVIII.; and if internal or external hæmorrhage sets in, *Arn.*, *Puls.*, *Ipec.* [Eclampsia of parturient females is sometimes arrested by *Gelseminum*, *Verat. viride* and by palliative doses of *Opium.* H.]

3. **Expulsion of the Placenta.**—If this expulsion is delayed on account of an absence of the necessary pains, *Puls.* or *Sec.* promotes this event; these two remedies are likewise to be resorted to, if the placenta adheres, although in this case other remedies may likewise have to be used, such as *Plat.* or *Bell.* Even if adhesion or partial expulsion of the placenta is complicated with violent hæmorrhage, *Puls.* and *Sec.* generally accomplish every thing that can be desired, so that only in a few cases other remedies may be required, such as *Plat.*, *Sabina*, *Bell.* etc.

4. **After-pains.**—If these are entirely wanting and the uterus does not contract, and *Puls.* and *Sec.* had already been given during labor, in such a case *Opium* often helps, and if the after-pains are too distressing, *Coff.* or *Nux vom.*, especially if the pains press upon the rectum or bladder; if they continue too long, *Cham.* and *Puls.* are the best remedies.

### 3. Affections of Lying-in Females.

1. **Immediate consequences of Parturition.**—If the parts are painful and swollen, it is in most cases sufficient to bathe them with a solution of *Arn.*, ten drops of the tincture to a cup full of water; if an abscess forms that threatens to discharge, and *Bell.* or *Laches.* has no effect, *Merc.* will afford relief. If the uterus has become prolapsed in consequence of hard labor, the prolapsus most generally yields to *Nux vom.* or *Sep.;* urinary difficulties yield to *Bell.*, and **strangury** especially to *Puls.* or *Sulph.;* involuntary discharges of urine are arrested by *Sepia ; Puls.* removes hæmorrhoids that had come on during parturition [also *Hamam.* H.] If the **lochia** are too scanty or are entirely suppressed, and fever sets in in consequence of this suppression, *Acon.* affords relief in very many cases; or *Cham.*, if colic and diarrhœa or toothache set in; or *Coloc.*, if the abdomen is tympanitically distended; *Bell.*, *Hyosc.* or *Stram.*, if the suppression is followed by delirium or mental alienation. Too **profuse** lochia, on the other hand, if still red, demand principally *Plat.*, *China*, or *Sec.*, and if already **white**, *Puls.*, *Sep.* or *Sulph.;* if **purulent**, *Sep.*, *Merc.*, *China* or *Calc.* If the **milk-fever** is too intense, *Acon.* or *Arn.* affords relief. For a general **exhaustion** after parturition I give *China* or *Sec.*, *Sulph.*, *Nux vom.*, *Verat. alb.;* for profuse **sweats**, *China*, *Acon.*, *Carbo veg.;* for the **falling** out of **the hair**, *Lyc.*, *Hepar*, *Silic.* or *Natr. mur.;* for the **large abdomen** which sometimes remains, mostly *Sep.* or *Coloc.;* for **stiffness** of the **small of the back** rendering stooping impossible, *Phosph.*

2. **Local affections of the Sexual Organs as remote consequences of Labor.**—A simple inflammation of the womb which sometimes occurs in such cases, is generally met very surely by *Bell.* or *Nux v.;* a **gangrenous putrefaction** of the womb by *Sec.*, if *Arsen.* has no effect; for subsequent **metrorrhagia** I give *Bell.*, *Sabina*, *China*, *Plat.* or *Sec.;* for **prolapsus of the womb**, which is very frequently caused by the mother leaving her bed too soon, *Sepia*, *Nux vom.* or *Bell.;* for **ovaritis**, which likewise happens quite frequently, principally *Bry.*, *Apis*, or *Coloc.* [See also Chap. XVIII.]

3. **Abdominal Complaints.**—Lying-in females sometimes show symptoms of true **enteritis** which must not be confounded with child-bed fever (see below), and which generally yields to *Acon.* 30th, two globules in water, and if not completely, afterwards to *Bry.*, *Bell.*, *Nux v.*, *Coloc.;* simple **colic** of lying-in females is relieved by *Cham.*, *Bell.* or *Bry.;* **constipation** by *Bry.* or *Nux v.*, or by *Opium*, *Plat.* or *Sulph.*, and the sometimes troublesome **diarrhœa** by *Rheum*, *Cham.*, *Puls.* or *Sec.* (See Chap. XIV. and XV.)

4. **Puerperal fever.**—Whether the fever originates in peritonitis, or uterine phlebitis, or sets in epidemically with a typhoid type, I always commence the treatment, if I am called at the very onset, with *Acon.* 30th, two globules in a few tablespoonfuls of water, of which I give a teaspoonful every two or three hours. This single remedy is sometimes sufficient to complete the cure. If insufficient, and the affection is rather centered in the uterus, I give *Bell.*, and if the peritoneum is chiefly affected, I give *Bry.* If such fevers do not come under my treatment until they have assumed a typhoid character, or if they set in with typhoid symptoms from the start, I resort at once, if the cerebral symptoms are more prominent, to *Bell.* or *Hyosc.*, more particularly if the case is complicated with convulsions; on the other hand, if abdominal symptoms prevail, with watery, fetid diarrhœic stools, petechiæ, miliaria, I give *Rhus t.* or *Arsen.* In a very desperate case, where the typhoid type had developed itself under allopathic treatment out of a simple peritonitis, and the patient, when passing under my treatment, lay in a state of absolute unconsciousness, with staring eyes, disfigured and pallid countenance, at times muttering, and at other times furious delirium, and a foul breath rushing out of the open mouth, and where neither *Hyosc.*, *Rhus t.*, nor *Ars.* effected any improvement, *Sulph.* produced as unexpected as brilliant a change for the better, after which *Nux vom.* completed the cure. Hartmann's remarks concerning the usefulness of *Cham.*, *Coff.* and *Coloc.* in this disease, require further clinical confirmation. In my own practice these remedies have never done the least good in such cases. Whether a cure is still possible in uterine phlebitis after the pus has already been absorbed and deposited in the lungs, pleura and cellular tissue, I am unable to say; a patient in this

condition died in three days, without *Rhus*, *Ars.*, *Laches.* or *Puls.* having had the least effect upon her.

5. **Eclampsia and other Spasms of lying-in women.**—The most efficient remedies in such cases are: *Ignat.*, *Cham.*, *Bell.*, *Hyosc.* or *Ipec.*, and sometimes *Plat.*, *Acon.* or *Coff.* [also *Gelseminum* and palliative doses of *Opium.* H.]

6. **Mental Alienations of lying-in women.**—Melancholy is relieved by *Acon.*, *Puls.*, *Aurum* [also *Cimicifuga racomosa*, H.]; nervous excitement and rage, with frightful visions and disposition to escape, *Bell.*, *Hyosc.* or *Stram.;* religious mania by *Sulph.* or *Verat. alb.;* nymphomania, with voluptuous tingling in the pudendum, by *Plat.;* with disposition to kiss everybody, by *Verat. alb.;* with lascivious talk and singing and a smell of goat over the whole body, by *Stram.*, and with frenzy, a shameless want of modesty and disposition to uncover her private parts, by *Hyosc.*

7. **Phlegmasia alba dolens,** is most frequently cured by *Bell.* and *Rhus t.*, and sometimes by *Lyc.* or *Ars.*, and sometimes even by *Puls.*, according as the female may be otherwise suffering. In some cases I have had to use all these remedies before the trouble ceased entirely [also *Acon.* in some cases. H.]

### 4. Affections of Nursing Females.

1. **Secretion of milk.**—A deficient secretion or the voluntary vanishing of the milk is sometimes remedied by *Puls.* or *Calc.;* if the secretion is suddenly suppressed by fright, *Acon.* or *Ignat.* restore it; if by a fit of anger or vexation, by *Bry.* or *Cham.;* after a cold, by *Puls.*, *Acon.* or *Dulc.* If the milk is bad, so that the infant refuses to take it, *Merc.*, *Cina.* or *Silic.* often correct this defect; and if too thin, so that the child does not gain by it, *China*, *Merc.* or *Sulph.* If the milk coagulates too readily, *Borax*, *Laches.*, and if it sours too easily, *Rheum* or *Puls.* If the breasts are turgid with milk and the milk does not run out, *Bry.* or *Bell.* and sometimes *Acon.* or *Cham.* will help; for a constant involuntary flow of milk, *Bell.*, *Calc.* or *Bry.* and very often *China* or *Puls.* are the

best remedies. [An excellent remedy to restore the flow of milk after suppression by a cold or from some constitutional cause, is *Asa fœtida*, middle attenuations. H.]

2. **The breasts.**—The soreness and cracking of the nipples are very often relieved by *Cham.* or *Sulph.*, and if these remedies are not sufficient, by *Ignat.*, *Calc.* or *Lyc.* If the breasts themselves are inflamed, and the swelling is red and hard, *Bry.*, *Bell.* or *Merc.* help in most cases, and if an abscess forms and discharges, *Phosph.* and *Silic.* are the remedies. Whether, as Hering fancies, *Bry.* and *Phosph.* act more on the *left*, and *Bell.*, *Rhus t.* and *Calc.* more on the *right* breast, I am unable to decide for the reason that if the breast is very hard and of a pale-red color, I generally give *Bry.* with the best result, and if there is less hardness and the inflammation assumes an erysipelatous character, *Bell.* or *Rhus t.*, no matter whether the left or right breast is invaded; if both breasts are attacked, all the above-named remedies act equally well on either or both.

3. The weakness caused by too long continued nursing, is very often relieved by *China* or *Carbo veg.;* if this weakness is associated with more or less profuse night-sweats, a dry hacking cough, pain between the scapulæ, emaciation and other suspicious signs of an incipient phthisis, and *China* does not relieve this condition even after the child is weaned, *Calc.* and *Lyc.*, and in some cases *Sulph.* will remedy those symptoms [also *Acon.* H.]

4. If, after the child is weaned, the milk continues to be secreted in spite of all reasonable preventive measures and an appropriate diet, *Puls.* or *Calc.* very often remedies the trouble.

5. **Metastases of the milk.**—In most cases where the complaints which befall mothers after they wean their babes, are attributed to a metastasis of the milk, the good-natured milk has most likely very little to do with the trouble, although I am acquainted with cases where a sudden suppression of the milk by fright, a fit of anger or a cold was not only succeeded by inflammation and swelling of the breasts, but likewise by chronic diarrhœa, inflammation of the abdominal viscera, asthmatic affections with or without cough, inflammatory cerebral irritations, dementia and

even impetiginous eruptions of longer or shorter duration. In such cases the **diarrhœa** was most successfully controlled by *Acon.*, *Bry.*, *Bell.*, or *Rhus t.;* the **difficulties of the chest** by *Puls.*, *Bry.*, *Acon.*, *Lyc.* or *Calc.;* the **inflammatory cerebral irritations** by *Bell.*, *Hyosc.*, *Rhus t.;* the **dementia** according to circumstances by the remedies mentioned above in Art. 3, 6, and the **eruptions** more particularly by *Rhus t.*, *Calc.*, *Sulph.* or *Dulc.*

### 5. Affections of New-born Infants and Infants at the Breast.

1. **Immediate Difficulties of New-born Infants.**— After a very difficult and protracted labor, children are sometimes born in an apoplectic condition, which must not be confounded with the apparent death of infants; in the latter state the circulation of the blood is neither obstructed nor suspended, only the respiration and muscular motions are wanting, the skin is pale, the flesh flabby and the countenance has a cadaverous appearance; whereas in the apoplectic condition the respiration is likewise suspended, but at the same time the movements of the heart and the pulse are imperceptible, the children look bloated, their faces and the skin of the body have a violet or bluish-red color. In such circumstances a single globule of *Acon.* 30th dry on the tongue often remedies this condition, or *Opium*, if the pulse, a few minutes after *Acon.* had been administered, still remains imperceptible; or even *Tart. emet.* if the circulation shows symptoms of improvement, but the breathing still remains suspended. For apparent death *China* 30th, three globules on the tongue, is the best remedy, and if this does not effect an improvement in 10 to 15 minutes, a similar dose of *Tart. emet.* may be given, or, as Hering very justly observes, a dose of *Laches.*, which does wonders in such cases. The **cyanosis** of new-born infants is generally more certainly acted upon by *Sulph.* or *Calc.* than by *Digit.*, and the **jaundice**, which is sometimes superinduced by a cold at the moment of birth, by *Acon.* or *Merc.* [also *Podophyllin.* H.] **Induration of the cellular tissue** requires mostly *Acon.*, *Bry.* or *Sulph.;* **tumors** on the head, if washing with Arnica-water does not help, require *Rhus*, or, if they suppurate, *Silic.;* for the **swollen breasts** of new-born infants I give *Cham.*, *Bry.* or *Bell.*, and if they are **indurated**, *Cham.* or *Arsen.;* for **umbilical hernia** I give *Nux vom.* or *Sulph.;*

for **inguinal hernia**, if *Nux vom.* or *Sulph.* is not sufficient, *Cocc.* or *Verat. alb.* If the **limbs** are **distorted** or **crooked**, I very often give *Sulph.* and *Calc.* at long intervals, and for **nævi materni** especially *Carbo veg.*, and likewise *Sulph.*, *Calc.*, *Sep.* and *Silic.*

2. **Ailments incident to the first period of life.**—The **singultus** of infants at the breast is most commonly relieved by *Acon.* or *Hyosc.*, and in other cases by *Nux vom.* or *Puls.;* **the stoppage of the nose** which interferes with their nursing, by *Nux vom.* or *Sambucus*, and likewise by *Cham.*, *Dulc.* (if worse in the cold), or by *Carbo veg.;* the **arrest of breathing** by *Cham.;* the **spasms** of the **chest** and **larynx**, with blueness of the face and a croupy cough, by *Acon.* or *Ipec.*, and sometimes by *Sambuc.;* the **soreness**, most commonly by *Cham.*, *Ignat.*, and also by *Rhus t.*, *Sulph.*, *Merc.*, *Carbo veg.*, *Silic.* or *Calc.;* the **sleeplessness** most commonly by *Coff. Bellad.* or *Cham.;* the **crying** very often by *Coff.*, *Cham.*, *Bell.* or by *Acon.*, if there is fever, colic or otalgia (see below); the **constipation** by *Bry.* or *Nux vom.*, and if these do not help, *Sulph.* or *Alum.;* the **retention of urine** by *Acon.*, also by *Puls.*, *Nux vom.* or *Camph.* (even 30th); the **prolapsus recti**, by *Ignat.*, *Nux vom.*, *Merc.* [also *Hamam.* H.]; the paroxysms of **fever**, by *Acon.*, no matter whether the fever is occasioned by teething, worms, threatening convulsions or some other impending disease. As regards the other diseases of infants, such as meningitis, hydrocephalus, ophthalmia, otalgia, trouble from teething, aphthæ, sore throat, colic, diarrhœa, coxalgia, spasms, erysipelas, rash etc., we refer the reader to the chapters where these affections are treated of.

3. **A few chronic affections of infants.**—If the heads of infants are **too large**, **(hypertrophy of the brain)**, *Sulph.*, *Calc.*, *Merc.* and *Silic.* afford the best relief; for a tardy closing of the fontanelles I give *Sulph.*, *Calc.*, *Puls.*, *Silic.;* if the children are slow in learning to walk, likewise *Sulph.*, *Calc.*, *Silic.* If they have **large** and **hard bellies**, with emaciation of the rest of their bodies (atrophia mesenterica), I give them first *Ars.*, if the disease is attended with **diarrhœa**, and if the diarrhœa is arrested and constipation has taken its place, I have recourse to *Nux vom.*, *Sulph.*, *Calc.* at long intervals. In a case of **spontaneous luxation**, I generally commence the treatment with *Rhus t.*, after which I give

*Sulph.*, *Calc.*, and *Silic.* at long intervals, giving *Merc.* and *Bell.* for the most part as occasional intercurrent remedies. The most effective remedies for the **stammering** of children, in my hands have been, *Bell.*, *Merc.*, *Plat.*, *Caust.*, *Sulph.*; *Euphrasia* more particularly if the stuttering was confined to recommencing the same sentence.

## CHAPTER XX.

## AFFECTIONS OF THE LARYNX AND BRONCHIA.

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### 1. Various Affections.

1. **Hoarseness, defects of the Voice.**—A common catarrhal hoarseness, with or without coryza or cough, frequently yields to *Drosera;* if the voice is very **hollow** and **deep** and the patient is only able to speak in a bass-tone of the voice, *Dros.* and *Sulph.* help; if the throat feels at the same time **raw** and **sore,** and likewise the chest, *Caust.;* if the hoarseness had remained after **measles,** *Carbo veg.*, *Dros.*, and sometimes *Dulc.* or *Sulph.*, and if after **croup,** most frequently *Phosph.* or *Lyc.* If attended with **catarrh,** *Merc.*, *Caust.* or *Silic.* help in most cases; if with **titillation** in the larynx, inducing cough, *Cham.*, *Merc.;* if with a good deal of **sneezing,** and roughness of the throat, *Rhus t.;* with **dry cough,** *Nux vom.*, *Caust.;* with cough and **expectoration,** *Puls.* or *Sulph.;* for **chronic** hoarseness, especially, *Caust.*, *Mang.*, *Lyc.*, *Phosph.*, *Carbo veg.* or *Silic.;* for persons who have to do a good deal of **talking,** *Phosph.*, *Laches.*, *Calc.*, *Carbo veg.;* if the voice is almost **extinct** and the patient is scarcely able to utter a loud word, *Puls.*, *Sulph.*, *Caust.*, *Phosph.*, *Hep.*, *Stann.*, *Ant. cr.*, *Calc.;* if there is not voice enough to sing, *Arg.*, *Graph.*, *Dros.;* for roughness of voice, while the person is singing, *Graph.;* if the hoarseness is worse **morning** and **evening,** *Carbo veg.;* worse during **damp** and **cool** weather, *Carbo veg.*, *Sulph. Merc.*

2. **Catarrh of the bronchial passages.**—If there is fever with heat and dryness of the skin, *Acon.* almost always helps very soon; if not, *Bell.*, *Bry.* or *Phosph.* will almost always be found suitable; if there is much perspiration at night, *Merc.*, *Puls.*, *China*, *Carbo veg.;* if there is much **chilliness,** creeping chills, *Merc.*, *Puls.*, *Nux vom.*, *Dros.;* more **heat** than chilliness, *Acon.*, *Bell.*, *Cham.*, *Merc.*, *Nux vom.* Again, if **catarrh** is a prevailing symp-

tom, *Puls.*, *Merc.*, *Nux vom.*, *Arsen.;* especially **dry catarrh,** *Ars.*, *Nux v.;* **fluent coryza,** particularly, *Puls.*, *Merc.*, *Ars.*, *Euphras.;* a good deal of **hoarseness** and roughness of voice, *Acon.*, *Cham.*, *Phosph.;* the **larynx** is **painful,** *Acon.*, *Bry.*, *Phosph.*, *Caust.*, *Sulph.;* a good deal of **tickling** in the air-passages, *Cham.*, *Nux vom.*, *Bry.*, *Verbasc.*, *Bellad.*, *Amm.*, *Dros.*, *Phosph.*, *Ipec.*, *Puls.;* **scraping** in the throat, *Merc.*, *Nux vom.;* a good deal of **mucus** in the throat, *China*, *Puls.*, *Sulph.*, *Ipecac.;* a good deal of **dry cough,** *Acon.*, *Cham.*, *Hyosc.*, *Ipec.*, *Caust.*, *Arsen.*, *Nux vom.*, *Bry.*, *Verbasc.*, *Con.;* **spasmodic** cough, *Bell.*, *Ambr.*, *Sepia*, *Ipec.*, *Hyosc.*, *Dros.*, *Phosph.;* cough with **expectoration,** *Puls.*, *Bry.*, *Phosph.*, *Sulph.*, *Merc.*, *Stann.*, *Lyc.;* **mucous rales** in the air-passages, *Puls.*, *Carbo veg.*, *Ipec.*, *Cham.*, *Hep.*, *Caust.*, *Sulph.*, *Calc.;* more or less dyspnœa, *Bell.*, *Rhus t.*, *Merc.*, *Sulph.*, *Sepia.* **Stitches** in the **chest,** more particularly, *Acon.*, *Bry.*, *Merc.*, *Bell.*, *Arn.*, *Phosph.*, *Sulph.;* **sore** feeling as if raw in the chest and throat, *Caust.*, *Laches.*, *Nux vom.*, *Puls.;* **weak** feeling in the chest, *Hep.;* chest and ribs **as if bruised,** *Bry.*, *Nux vom.*, *Sulph.*, *Carbo veg.*, *Merc.* If there is a painful **rush of blood** to the head, *Acon.*, *Bell.*, *Hyosc.*, *Merc.*, *Bry.*, *Ipec.*, *Puls.*, *Nux vom.*, *Lyc.;* **rheumatic distress** in the head, *Acon.*, *Bry.*, *Merc.*, *Lyc.*, *Ars.*, *Puls.;* **ophthalmia,** sore eyes, *Acon.*, *Bell.*, *Merc.*, *Arsen.;* **lachrymation,** *Acon.*, *Merc.*, *Arsen.;* **vomiturition** and vomiting, retching, *Ipec.*, *Nux v.*, *Puls.*, *Carbo veg.*, *Bry.*, *Cina*, *Hyosc.*, *Dros.*, *Ars.*, *Con.;* **painfulness of the muscles** of the epigastrium, hypochondria, chest and ribs, *Nux v.*, *Puls.*, *Bell.*, *Hyosc.*, *Bry.*, *Sulph.*, *Carbo veg.*, *Merc.;* bowels **constipated,** *Bry.*, *Nux v.*, *Merc.*, *Arn.*, *Sulph.*, *Sepia;* **diarrhœa,** *Ipec.*, *Merc.*, *Arsen.*, *Sulph.;* **palpitation of the heart,** *Puls.*, *Ars.*, *Sulph.*, *Acon.*, *Lyc.;* **rheumatic pains in the limbs,** more especially, *Bry.*, *Arn.*, *Merc.*, *Ars.*, *Puls.*, *Rhus t.*, *Sepia.* Great **weakness** and lassitude, *China*, *Ipec.*, *Arsen.*, *Rhus t.*, *Puls.*, *Merc.*, *Phosph.*, *Sulph.*

3. **Influenza.**—What distinguishes influenza, which is really nothing more than a very violent catarrhal fever, from other fevers of this class, is the circumstance that influenza attacks the whole nervous system at once, sometimes with rheumatic pains in all the limbs, more or less lameness, fever and inflammatory symptoms which may increase to a genuine acute bronchitis or acute pleuritis. At the present time it scarcely ever sets in with the same violence as before, so that it really differs from simple febrile catarrh which, when very severe, may present all the symptoms of an ordinary

influenza, only by its epidemic character, and that only few persons are confined to their beds by an attack of influenza, as was so often the case when this epidemic first made its appearance among us. When it first broke out in Europe forty years ago, our most successful remedies for this lameness of the extremities with a feeling of soreness and as if they had been bruised, which symptoms generally characterized the incipiency of the attack, were *Rhus t.* and *Caust.*, which I employ even at this day with the same success, if influenza manifests itself exceptionally in the old form. They generally remove these symptoms very rapidly, changing the disease to a simple catarrhal fever, which afterwards does not require any other treatment than that which is pursued with any other catarrh with cough and coryza. If **pleuritic stitches** are present at the onset I always give *Acon.*, *Bry.*, *Merc.* or *Arn.*, according to the indications under **pleuritis** (see next Chap.); if symptoms of **cerebral irritation** are present, *Bell.* or *Bry.;* if the **liver** is very much involved, *Bell.*, *Acon.*, *Merc.*, *Nux v.*, *Lyc.*, according to the indications under **hepatitis**; if the **lungs** are affected, *Acon.*, *Bry.*, *Phosph.*, *Laches.*, *Merc.*, *Sulph.;* if **rheumatic pains** prevail, *Caust.*, *Rhus t.*, *Bry.*, *Acon.*, *Merc.*, *Lyc.*, and if the patient complains of great **weakness,** lassitude and a bruised feeling in the extremities, beside *Rhus t.* and *Caust.*, also *China*, *Phosph.*, *Arsen.* and *Ipecac.;* for the balance the reader is referred to No. 2, **simple catarrh.**

4. **Bronchitis.**—This inflammation which, if setting in in an acute form, is distinguished from simple bronchial catarrh by the more intense, inflammatory fever, with heat and dryness of the skin, and by a painfully dry, rough cough from the depths of the chest, having a metallic clangor and being frequently accompanied by considerable oppression of breathing in the upper part of the chest, is very often, if treated at the start by *Acon.*, in the form of a watery solution, not perhaps completely cured in 24 or at most 48 hours, but almost always transformed into a simple catarrh, the further treatment of which can easily be learned from No. 2. If the inflammation had already progressed considerably before the case is confided to our hands, and *Acon.* does not even effect the least sign of improvement in 24 hours, *Merc.* becomes an indispensable remedy. If, after the removal of the fever, oppression on the chest, cough, pain in the chest or other symptoms that do not

yield to *Acon.*, remain, I derive particular benefit, if there is much **crepitation,** from *Bell.*, *Bry.*, *Carbo veg.;* if the breathing is **wheezing,** from *Bry.*, *Bell.*, *Samb.*, *Laches.;* if **rattling,** from *Bell.*, *Samb.*, *Carbo veg.*, *Tart. emet.*, *Hep.;* if there is a constant **pressure** on the **chest,** from *Bry.*, *Bell.;* if there is a spasmodic **constriction** of the chest, from *Cupr.*, *Bell.*, *Ars.*, *Ipec.;* in paroxysms of **spasmodic cough,** from *Bell.*, *Ipec.*, *Cupr.*, *Hyosc.;* if, after the inflammation is subdued, a large quantity of mucus accumulates in the air-passages, threatening suffocation, especially in the case of children, we derive particular aid from *Ipec.*, *Tart. emet.*, *Samb.*, *Hepar*, *Carbo veg.*, and sometimes from *Arsen.* **Chronic** bronchitis, if attended with a **dry,** more or less **spasmodic** cough, is often improved by *Calc.*, *Carbo veg.*, *Phosph.*, *Bell.*, *Hyosc.*, *Cupr.*, *Ipec.*, *Kali carb.*, and even by *Dros.* and *Spong.* On the contrary, if much mucus is secreted (blennorrhœa pulmonum, phthisis mucosa) we derive less benefit from the vaunted *Stannum*, than from *Sulph.*, *Carbo veg.*, *Calc.*, *Caust.*, *Fer.*, *Ant. cr.* and *China.* For the **suffocative catarrh** of old people *Cupr.* is exceedingly beneficial beside *Ars.* and *Carbo veg.;* and, if **paralysis of the lungs** threatens, *Tart. emet.* is the best remedy; not *Lyc.*, as is very incorrectly advised in Rueckert, Vol. III. page 101; neither have I nor Goullon ever derived the least benefit from the use of this agent in suffocative catarrh.

5. **Laryngitis,** inflammation of the larynx.—The chief remedy for this inflammation, which locally differs from bronchitis by the circumstance that the pain and the respiratory difficulties seem confined to the larynx, is *Acon.*, provided the disease sets in in an acute form and is attended with inflammatory fever. Even the spasmodic suffocative symptoms which often accompany an attack of laryngitis (*asthma Millari*) generally yield to *Acon.* at the same time, or, if not to *Acon.*, to *Samb.* If a dry irritating cough remains, with a good deal of tickling in the larynx, *Hyosc.*, *Ipec.*, *Bry.* or *Spong.* remove this cough in most cases; if the cough causes retching or vomiting, *Bry.*, *Ipec.*, *Nux v.*, *Dros.*, *Bell.;* if the larynx remains painful, with stitches and pressure in this organ, I give *Bell.*, *Bry.*, *Spong.;* if sensitive to contact, especially, *Bell.*, *Hepar*, *Laches.;* if the voice during a coughing fit has a hollow and deep sound, *Verbasc.*, *Spong.* and *Dros.* are indicated. In **chronic** laryngitis (phthisis laryngea), the best remedies for a **dry** cough are, *Caust.*, *Spong.*, *Dros.*, *Sulph.*, *Calc.*, *Antim. cr.*, *Hepar*,

*Argent.*, *Laches.*, *Phosph.*, *Ars.*, and if suppuration has set in, *Sulph.*, *Calc.*, *Caust.*, *Hepar*, *Silic.*

6. **Spasm of the glottis, asthma thymicum,** Kopp.—After I had cured my daughter, a child of five years, in 1849, of this disease, which set in one morning with all the frightful symptoms of true croup, and I expected every moment to see her perish of asphyxia, in less than ten minutes, by means of a single dose of *Acon.* 30, three globules, I have commenced the treatment of this spasm in every subsequent case with *Acon.*, thereby unfortunately creating a belief that croup can be wiped out as it were by a stroke of magic. Not every case of spasm of the glottis can be cured so easily with *Acon.* alone, although this remedy never fails, if no complications are present, to afford speedy help. If the spasm sets in in company with other spasmodic symptoms, we have to resort to other remedies, such as *Bell.*, especially in the case of scrofulous children, and likewise *Ipec.* and *Verat. alb.*, but above all, *Cupr. Merc.* and *Laches.*, or *Zinc.* and *Amm. carb.* have never afforded me much help in this disease. In more than one case, however, I have radically removed a disposition to a return of the spasm by means of a dose of *Sulph.*

7. **Croup, membranous Croup.**—The treatment of this disease is not as difficult as is commonly supposed, provided we do not lose our presence of mind, and proceed coolly and with proper discretion. At the onset of the disease, if the child loses its cheerfulness, shows symptoms of fever, passes a urine that looks as if it had been stirred with flour, and utters the first characteristic sound of a barking, ringing cough, the danger is not yet very great, for we may have yet four or five, and even eight days before the really suffocative symptoms belonging to the period of exudation, set in. If, at this stage, we assail the little patient with big doses of *Spong.*, *Iodine* or *Brom.*, or even with these three remedies in alternation, in a purely empirical fashion, or with alternate doses of *Bry.* and *Ipec.*, as was done by a Paris homœopathic physician by the advice of a clairvoyant, and nothing more is done than to give the medicines in increased quantities—if, in spite of this horrid medication, the suffocative symptoms set in nevertheless, increasing in violence the longer this insane method is continued, there is indeed little chance of saving a patient thus

abused; and I have seen more than one case where the child perished after this so-called homœopathic treatment had been continued for a week, and the disease had been "**borne down upon with the most massive doses.**" In croup, likewise, success does not depend upon the quantity of heroic remedies, but upon their quality, that is to say, upon their truly-specific relation to the case before us, and, as far as I am concerned, I do not see why those who only believe in the saving power of the most energetic remedies and doses, do not all at once pour a whole bottleful of smoking sulphuric acid into their patients' throats; this would not only burn all the pseudo membranes but a good deal more, and nobody could reproach them with not having acted with sufficient energy. In treating a case of croup I generally proceed as follows: If I am sent for at the commencement of the attack, I give *Acon.* 30th, three globules in a few spoonfuls of water, of which solution I give a teaspoonful every three hours until the fever and the croupy, ringing sound of the cough have disappeared, and it is evident from the resonance that the cough has assumed a catarrhal form. But since experience has taught me that nothing is more insidious than the first or inflammatory stage of croup, and it often happens that, after the cough has almost entirely disappeared, and not a sign of fever is any longer perceptible, and the children play about on the floor and seem quite bright and cheerful, the disease sometimes breaks out again all of a sudden in the dead of night, with every symptom of exudation; I continue the *Acon.*, even if the croupy sound of the cough has been removed, at longer intervals, until the cough is quite loose, and has been transformed into a loose mucous cough or a free catarrhal discharge from the nose has made its appearance. In pursuing this course I have seen these two last-mentioned changes, with whose appearance every danger may be positively considered removed, set in on the second, third and fourth day, and in other cases, where I was not sent for at the commencement of the attack, only on the eighth day of the disease, without having had to use any other remedy than *Acon.* as long as the disease remained in its first stage and no suffocative symptoms had set in. If paroxysms of suffocation set in, but only at night, at long intervals, and the little patients remain tolerably cheerful in the day-time, I continue and adhere to the *Acon.*, until no more suffocative paroxysms occur, and, if they cease, continuing the same medicine until the

disease assumes a catarrhal form as previously described. If, in spite of the use of *Acon.*, the suffocative paroxysms break out again, but chiefly at night, and we may infer from this fact, not that the exudative process is making full headway, but simply, as Hering very properly observes, that the mucous lining swells up evening and night in the form of nettle-rash, returning again to a more normal condition in the day-time, I give *Spong.* 30th in the same manner as I had given *Acon.*, more especially if the cough is dry and ringing and the inspirations have a crowing sound, and continue the *Spong.* as long as it seems to have a good effect; but if it does not effect any improvement within 24 hours, and the cough has a rattling, sawing sound, I change to *Hep.*, which I administer in the same manner as *Spong.*, continuing it as long as it acts favorably. If *Hep.* does not improve the case, I then give *Arsen.*, not only if the children had been affected with nettle-rash shortly before, but likewise if the weakness and anxiety during the paroxysms reach a very high degree; after giving *Ars.*, the disease sometimes remains stationary, so that *Hep.*, *Bell.* or *Phosph.* will now complete the cure. If the patient does not come under my treatment until the third stage has set in and exudation is under full headway, patches of false membrane are raised, the patient looks pallid as in death, and the face assumes a livid appearance during a coughing fit, I resort either to *Spong.* or *Hep.*, according as the symptoms in No. 2 prevail; and if neither of these remedies effects the least sign of improvement in 24 hours, I have recourse to *Phosph.*, which has produced splendid effects in my hands in this stage of croup. I cannot sufficiently warn against the use of large doses in this stage of the disease. Large doses, instead of promoting the cure by absorption, as our small doses generally do, cause most generally a detachment of the false membranes, which may not be a very bad result as long as the disease is confined to the larynx, trachea and the larger bronchi, from which the detached patches can easily be expelled by cough. But if the finer bronchial ramifications are invaded, as we know from post-mortem examinations that they may be, the patient, even if the membranes are detached, dies nevertheless in consequence of the stoppage of these delicate tubes by the detached membranes that cannot be coughed up. For this reason I never resort to *Arsen.* or *Bry.* in this last stage of exudation, since these two remedies, when given in diphtheritis or pharyngeal croup,

which is so nearly analogous to laryngeal croup, only effect a detachment of the pseudo membranes, but not, like *Phosph.* and *Apis*, their absorption. How rapidly the process of re-absorption goes on in these diseases, has been shown to me more than once in pharyngeal croup, provided I had given the right remedy, and it is for this reason that I do not despair of the good effects of *Phosph.*, even in the most extensive croupy exudation. As regards *Apis*, I have not yet had a chance to try it in croup; I would request my colleagues, if a case of croup comes to them in the third stage, never to omit a careful exploration of the chest, in order to ascertain how far the croupy exudation extends and to shape their prognosis in accordance with the results of their examination. If the more delicate bronchial ramifications are invaded and *Phosph.* does not help in a few hours, the case is beyond our means of cure. Finally, if the croupy inflammation, in whatever stage it may be, has been changed to a simple catarrhal irritation, and the following remedies have not yet been made use of, I give for **fluent coryza**, *Merc.;* for **dry cough**, *Cham.*, *Acon.* or *Ipec.;* for the **hoarseness** which sometimes remains for a long time, *Phosph.*, *Hep.*, *Bell.* or *Carbo veg.;* if the **hollow cough** returns, *Bell.* or *Spong.*, and for a long-lasting **mucous expectoration**, *Hep.* or *Phosph.* In the case of children disposed to a return of croup, if the following remedies have not yet been used, I have obtained good effects from *Sulph.*, *Calc.*, and *Phosph.*, giving each remedy at long intervals.

8. **Whooping-cough.**—In the first stage of the disease, if the cough is not yet spasmodic, but has the peculiar drawing and hissing sound, the further course of the disease can be considerably mitigated, though not entirely cut off, by *Acon.*, *Bell.*, *Nux v.*, *Ipec.* or *Cina.* If this catarrhal cough sets in with a more or less inflammatory character, fever, pains in the larynx etc., *Acon.* sometimes removes the whole disease; and sometimes *Nux v.*, if the patient complains of a peculiar feeling of **soreness** in the larynx, without inflammatory fever, and the paroxysms set in more particularly early in the morning or after a meal and the cough remains dry; whereas if the cough is **moist** at the very beginning, or becomes moist after *Nux v.*, *Puls.* is most generally suitable, much more frequently than *Dulc.;* likewise *Bell.*, after the inflammatory irritation of the larynx, but not the cough, has

been removed by *Acon.;* in families where several members were down with a fully-developed whooping-cough, I have often seen *Bell.* arrest the further progress of the disease in the case of other members that had been but recently attacked. If the cough exhibits a spasmodic character at the onset, *Ipec.* often affords relief even at this stage, more particularly if the patient is not only troubled with great dyspnœa, but expectorates a large quantity of mucus during a coughing fit; *Cina* likewise often breaks the whole nature of the cough, when there is a good deal of sneezing at the very beginning of the attack, especially in the case of children who are afflicted with worms, frequently bore in their noses and are in the habit of wetting their beds; or *Carbo veg.*, if the first attacks of the spasmodic cough set in without vomiting, especially in the evening or morning. If the cough has evidently passed into the second or convulsive period, I have found the following remedies particularly effective: *Dros.*, *Ipec.*, *Verat. alb.*, *Cina*, *Cupr.*, likewise *Sepia*, and sometimes, as intercurrent remedies for the purpose of mitigating the attacks, *Arn.*, *Kali carb.*, *Bell.*, *Ars.;* it is more particularly the following indications that I have found confirmed in many cases: if the paroxysm is preceded by **spasm of the glottis,** *Ipec.;* if preceded by great **anxiety,** *Cupr.;* if by **weeping** or moaning, *Arn.;* if the attacks were attended with **hæmorrhage** from the mouth and nose, *Dros.*, *Cina*, *Ipec.;* with **vomiting of mucus** without food, *Dros.*, *Verat. alb.*, *Ipec.*, *Tart. em.;* with vomiting of the **ingesta,** more particularly, *Dros.*, *Ipecac.*, *Calc.*, *Kali carb.*, *Carbo veg.;* **involuntary discharge of urine,** *Verat. alb.;* with **painfulness of the pit of the stomach,** *Dros.;* painfulness of the **abdomen,** *Nux v.*, *Verat. alb.;* as if something were **torn loose,** *Bell.*, *Nux v.;* with paroxysms of **suffocation,** *Ipec.*, *Cupr.*, *Verat. alb.*, *Ars.;* **pains in the chest,** *Verat. alb.*, *Cina*, *Cupr.;* **convulsions** of the extremities, *Cupr.;* **tetanic** spasms, *Cina*, *Cupr.*, *Ipec.;* if the attacks end with **nose-bleed,** *Cina;* with **sneezing,** especially, *Cina*, *Bell.;* with **vomiting,** *Cina*, *Ipec.*, *Bell.;* with **gurgling** from the throat down into the abdomen, *Cina;* with long-continued **suspension of breathing;** with **weeping** or moaning, *Cina*, *Arn.;* with great **lassitude,** weakness, *Verat. alb.*, *Ars.;* if **between** the attacks there is a good deal of **rush of blood** to the head, *Bell.*, *Bry.;* **sore throat** with pain during deglutition, *Carbo veg.*, *Bell.;* **vomiting,** also without cough, *Puls.*, *Carbo veg.*, *Tart. emet.*, *Ipec.*, *Verat. alb.;* a good deal of **mucus** in the air-passages, *Cupr.*, *Verat. alb.*, *Cina*, *Ipec.;*

**slow fever,** with indolence, weakness, weariness, constant chilliness and a good deal of thirst, *Verat. alb.;* **miliaria,** especially, *Ipec., Verat. alb., Carbo veg.;* **bloated face,** especially between the eyes, *Kali carb.;* finally, if the paroxysms of cough set in principally in the **evening** or **at night,** *Dros., Carbo veg., Puls.;* especially **early in the morning** or **after midnight,** *Kali carb., Dros.;* **early** in the morning and in the forenoon, *Nux v.;* **after a meal,** *Ipec., Nux v.;* **while** eating, *Calc.;* worse in the **open air,** *Carbo veg.* If these remedies have succeeded in subduing the spasmodic stage, which they sometimes do in a week or a fortnight, and even in a few days, the remaining cough is very often controlled by *Puls., Ipec., Hep., Carbo veg., Dulc.,* or *Sulph.,* according to the indications given partially in this and partially in the subsequent article under **Cough.** In the last stage I give the remedies dry on the tongue, a single dose, which I allow to act six or eight days; whereas in the catarrhal-inflammatory, as well as in the spasmodic period, I always administer them in form of a watery solution, a teaspoonful after every new paroxysm. This is the mildest and at the same time the most reliable manner of accomplishing our purpose.

### 2. Paroxysms of Cough of various kinds.

**Remark.**—If we were not frequently consulted by many persons on a **chronic** cough, and if there were not a good many kinds of chronic cough, such as a purely **nervous** cough, a **gastric** cough (mostly occasioned by worms), the **dentition-cough** of children etc., which do not depend upon pulmonary phthisis or chronic bronchitis, I should have omitted this article, for the reason that cough is always a mere symptom; but to any one who knows what an isolated symptom it sometimes is, I most likely do a favor by offering a few remarks concerning these different kinds of cough and the curative indications which I know from actual experience can be depended upon as such.

1. **Catarrhal Cough.**—A cough remaining after acute catarrhal affections, may very often depend upon a more or less continued irritation or even weakness of the mucous membrane of the air-passages; but if an acute catarrhal affection of this kind returns regularly every spring or even fall, there is great probabili-

ty that tubercles or even ulcerous disorganizations are the primary cause of the disease. Be this as it may, for a **dry** chronic cough as a remnant of catarrh, I give principally *Sulph.*, *Caust.*, *Calc.*, and very often *Carbo veg.* or *Silic.*, and if the cough is accompanied by a copious **expectoration of mucus**, and *Puls.* and *Dulc.*, and *China* and *Fer.* do no good, *Phosph. ac.* and *Silic.*, and likewise *Sulph.*, *Calc.* or *Carbo veg.* render excellent service. If the cough is attended with chronic **hoarseness**, with burning and soreness in the chest, *Caust.* helps in a good many cases, and if the throat is not so very painful, *Sulph.*, *Phosph.*, *Calc.* or *Carbo veg.*, and several other remedies mentioned under Nos. 1, 2, 3, 4, if the indications there given, as well as the indications given below under No. 5, correspond.

2. **Gastric cough, tussis abdominalis.**—This cough, which may not only harass individuals who are afflicted with worms, but likewise persons suffering with chronic weakness of the digestive organs, and most frequently those who are troubled with liver-complaint, in reality only ceases with the removal of the primary affection, but, if supervening during the course of such diseases, very often yields important indications for the selection of appropriate remedies, in which case, if the cough results in vomiting which affords relief, *Puls.*, *Ipec.*, *Nux v.*, *Sulph.*, *Sil.*, *Fer.*, *Calc. carb.* etc. not only cure the cough but will likewise be found indicated for the primary malady. In case of **worms**, or irritation from **teething**, *Cina* or *Merc.* mostly proves an efficient remedy.

3. **Nervous, spasmodic or irritative cough.**—For this cough, with which hysteric females and teething children are often troubled, the following remedies are very often the most efficacious, *Bell.*, *Hyosc.*, *Ipec.*, *Cina*, *Puls.*, *Ambra*, *Conium*, or even *Verat. alb.* and *Cupr.*, according to the subsequently-given indications for the remedies adapted to the different forms of cough.

4. **Hæmoptysis.**—Although this phenomenon is in most cases a very dangerous symptom of incipient tubercular phthisis, yet the expectoration of blood during a paroxysm of cough may proceed from other slight causes, such as a simple, more or less

inflammatory irritation of the mucous lining of the air-passages, as may occur in all catarrhs, or a simple **rush of blood to the chest,** as may take place in consequence of menstrual or hæmorrhoidal suppression etc. In the former case, that of simple catarrhal inflammation, *Acon.* in form of a watery solution, morning and evening, often helps very rapidly, likewise *Bry.*, *China* or *Puls.;* after suppression of hæmorrhoids, beside *Acon.*, *Nux v.*, *Sulph.*, *Carbo veg.*, *Phosph.;* if the menses are **irregular,** *Puls.*, *China*, *Bry.*, *Sulph.*, *Phosph.* For further particulars see **Pulmonary Hæmorrhage,** in the next chapter.

5. **Special Indications according to the kind of cough.**—The most efficient remedies, in my hands, have been, for a **dry** cough, *Acon.*, *Nux v.*, *Bell.*, *Hyosc.*, *Cham.*, *Bry.*, *Caps.*, *Rhus t.*, *Sulph.*, *Calc.*, *Caust.*, *Ignat.*, *Kali carb.;* **loose cough** early in the morning, but dry at night and in the evening, *Cham.*, *Nux v.*, *Calc.*, *Silic.*, *Sulph.*, *Arsen.*, *Lyc.*, *Puls.*, *Phosph. ac.;* for **racking** cough, *Bell.*, *Nux v.*, *Merc.*, *Calc.*, *Kali carb.*, *Phosph.*, *Stann.*, *Sulph.*, *Carbo veg.*, *Rhus t.*, *Silic.*, *Puls.*, *Ign.;* for **deep, hollow** cough, *Dros.*, *Hepar*, *Verbasc.*, *Verat. alb.*, *Silic.*, *Caust.*, *Bell.*, *Staphys.;* **titillating** cough, *Cham.*, *Hyosc.*, *Bell.*, *Ipec.*, *Merc.*, *Rhus t.*, *Phosph. ac.*, *Sulph.*, *Laches.*, *Nux vom.*, *Staphys.*, *Verat. alb.;* as from **dust** in the throat, *Bell.*, *Ignat.*, *Calc.*, *China*, *Arsen.*, *Puls.;* **spasmodic** cough, *Hyosc.*, *Ipec.*, *Bell.*, *Carbo veg.*, *Puls.*, *Nux vom.*, *Cina*, *Dros.;* **rough,** hoarse, scraping cough, *Nux vom.*, *Puls.*, *Ignat.*, *Verbasc.*, *Hep.*, *Stann.;* **suffocative** cough, *Tart. emet.*, *Ipec.*, *Silic.*, *Cupr.*, *Ars.*, *Nux vom.;* as from the **vapors of Sulphur** in the throat, *China*, *Puls.*, *Ign.*, *Arsen.;* if the cough starts from the **throat-pit,** *Cham.*, *Ign.*, *Bell.*, *Laches.*, *China*, *Ipec.*, *Staphys.*, *Stann.*, *Calc.*, *Caust.;* from the **chest,** *Caust.;* from the **stomach,** *Bry.*, *Puls.*, *Sep.;* if there is **much expectoration,** *Sulph.*, *Calc.*, *Puls.*, *Phosph. ac.*, *Staphys.*, *Stann.*, *Carbo veg.*, *Ipec.*, *Hep.*, *Bry.*, *Sil.*, *China*, *Lyc.;* if the expectoration only takes place **early in the morning,** *Nux vom.*, *Cham.*, *Puls.*, *Bry.*, *Phosph.*, *Phosph. ac.*, *Sep.*, *Calc.*, *Carbo veg.;* if the expectoration tastes **bitter,** *Puls.*, *Dros.*, *Cham.*, *Merc.*, *Nux v.;* if **putrid, foul,** *Puls.*, *Fer.*, *Carbo veg.*, *Lyc.*, *Stann.;* like **old catarrh,** especially, *Puls.*, *Sulph.;* having a **sweetish** taste, *Phosph.*, *Calc.*, *Stann.*, *Sulph.;* having a **sour** taste, *Calc.*, *China*, *Nux vom.*, *Puls.*, *Phosph.;* having a **saltish** taste, *Lyc.*, *Ars.*, *Sulph.*, *Puls.*, *Stann.*, *Phosph.*, *Sep.;* **foul-smelling,** *Puls.*, *Sulph.*, *Sep.*, *Carbo veg.*, *Stann.*,

*Calc.*, *Silic.;* **mucous** expectoration, *China*, *Staphys.*, *Phosph. ac.*, *Sulph.*, *Puls.*, *Ipec.*, *Laches.*, *Lyc.*, *Silic.*, *Stann.*, *Calc.*, *Dulc.*, *Phosph.*, *Carbo veg.;* **bloody** mucus, *China*, *Merc.*, *Acon.*, *Bell.*, *Carbo veg.*, *Fer.*, *Staphys.*, *Silic.*, *Bry.*, *Ars.;* **pure** blood, *Acon.*, *Arn.*, *China*, *Ipec.*, *Phosph.*, *Bry.*, *Fer.*, *Ars.*, *Sulph.*, *Dulc.;* **lumpy** expectoration in little fragments, *Silic.*, *Calc.*, *Lyc.*, *Laches.*, *Hep.*, *Sulph.*, *Kali carb.*, *Stann.;* watery expectoration, or consisting of thin mucus, *Hep.*, *Carbo veg.*, *China*, *Puls.*, *Merc.*, *Ars.*, *Fer.*, *Sulph.;* consisting of **thick mucus**, *Puls.*, *Sulph.*, *Calc.*, *Phosph.*, *Silic.*, *Stann.;* **purulent mucus**, *Dros.*, *Staphys.*, *Calc.*, *Puls.*, *Silic.*, *China*, *Carbo veg.*, *Fer.*, *Merc.*, *Phosph.*, *Sep.*, *Stann.*, *Lyc.*, *Sulph.;* **yellowish**, *Puls.*, *Bry.*, *Carbo veg.*, *Sulph.*, *Lyc.*, *Phosph.*, *Calc.*, *Phosph. ac.*, *Staphys.*, *Dros.*, *Sep.*, *Stann.;* **gray, grayish**, *Carbo veg.*, *Lyc.*, *Ars.*, *Sep.;* **green, greenish**, *Puls.*, *Sulph.*, *Calc.*, *Fer.*, *Merc.*, *Carbo veg.*, *Lyc.*, *Sil.*, *Ars.*, *Stann.;* **whitish**, *Carbo veg.*, *Phosph. ac.*, *Silic.*, *Calc.*, *Sulph.*, *Lyc.*, *Phosph.*, *Sep.*, *Puls.;* **tough**, firmly adhering, *Sulph.*, *Silic.*, *Nux v.*, *China*, *Arsen.;* **copious**, *Puls.*, *Dulc.*, *Sulph.*, *Sepia*, *Stann.*, *Silic.;* if the matter which had been detached by coughing, cannot be expectorated, *Caust.*, *Sep.*

6. **Indications according to the exciting causes and the time when the cough breaks out.**—If the cough sets in from every effort, *Ipec.;* from every **movement of the body**, *Bry.*, *Nux v.*, *Fer.*, *China*, *Phosph.*, *Silic.;* from moving the **chest**, more particularly, *Nux vom.*, *China*, *Phosph.*, *Stann;* from a **cold**, generally, *Dulc.*, *Carbo veg.*, *Sep.*, *Cham.*, *Puls.*, *Hep.;* worse from **cold air**, *Dulc.*, *Laches.*, *Ipec.*, *Rhus t.;* in the **cold** generally, *Carbo veg.*, *Ars.*, *Hep.*, *Caust.*, *Phosph.;* worse in the **open air**, *Phosph.*, *Sulph.*, *Arsen.*, *Rhus t.;* excited **by eating**, *Bry.*, *Laches.*, *Nux vom.*, *Phosph.*, *Ars.*, *Calc.;* excited by **laughing**, *Dros.*, *Phosph.*, *Stann.*, *China;* while **reading**, *Nux v.*, *Phosph.*, *Stann.;* in a **recumbent posture**, especially, *Hyosc.*, *Dulc.*, *Puls..*, *Sulph.*, *Ars.*, *Phosph.*, *Silic.*, *Sep.;* while **reflecting**, *Nux v.;* after **sleeping**, every time, *Laches.;* from **talking**, *China*, *Laches.*, *Stann.*, *Cham.*, *Hep.*, *Silic.*, *Phosph.;* worse in a **room**, *Puls.*, *Dulc.;* excited by a **deep inspiration**, *Dulc.;* brought on again by **drinking**, *Ars.*, *China*, *Hep.*, *Laches.*, *Bry.;* from the **warmth of the room**, *Puls.*, *Bry.*, *Dulc.;* better in the **open air**, *Puls.*, *Dulc.;* when **raising** oneself in **bed**, *Hyosc.;* by **warmth**, getting warm, *Cham.* According to the **time** of the **day**, if the cough comes on or gets worse in the **evening**,

*Carbo veg.*, *Caps.*, *Rhus t.*, *Calc.*, *Ars.*, *Phosph.*, *Stann.*, *Hep.*, *Puls.;* in the evening in **bed**, after lying down, *Hyosc.*, *Ignat.*, *Ars.*, *Calc.*, *Carbo veg.*, *Puls.;* **at night** generally, *Merc.*, *Caps.*, *Rhus t.*, *Silic.*, *Sulph.*, *Stann.*, *Dros.*, *Cham.*, *Hyosc.*, *Bell.*, *Kali carb.*, *Puls.*, *Sep.:* **before** midnight, *Carbo veg.*, *Rhus t.;* **after** midnight, *Kali carb.*, *Dros.*, *Bell.*, *Nux v.;* even during **sleep**, *Cham.*, *Calc.*, *Laches.*, *Merc.*, *Verbasc.;* worse **after** sleeping, *Laches.;* early **in the morning** and **evening**, *Lyc.*, *Phosph.;* only **early** in the morning, *Ign.*, *Nux vom.*, *China*, *Arsen.*, *Stann.*, *Lyc.;* **day** and **night**, *Calc.*, *Carbo veg.*, *Lyc.*, *Phosph.*

7. **Indications according to the Accessory Affections.**—If attended with **congestive** symptoms about the head, *Bell.*, *Bry.*, *Nux v.*, *Sulph.;* with **headache**, *Nux v.*, *Arn.*, *Bry.*, *Sulph.*, *Calc.*, *Ipec.;* as if the head would **fly to pieces**, *Nux v.*, *Sulph.*, *Bry.*, *Caps.*, *Bell.;* **stitches** in the head, *Arn.*, *Calc.;* **throbbing** in the head, *Ipec.*, *Puls.*, *Arsen.*, *Lyc.;* **retching** and **vomiting**, *Ipec.*, *Nux v.*, *Puls.*, *Carbo veg.*, *Dros.*, *Bry.*, *Fer.*, *Calc.*, *Silic.*, *Stann.*, *Sulph.*, *Caps.*, *Rhus t.;* of the **ingesta** in particular, *Ipec.*, *Nux v.*, *Calc.*, *Carbo veg.*, *Dros.*, *Puls.*, *Bell.*, *Calc.*, *Lyc.;* previous to a paroxysm, *Bell.;* painfulness of the **epigastrium** and hypochondria, *Nux v.*, *Puls.*, *Arn.*, *Bry.*, *Lyc.*, *Dros.*, *Hyosc.*, *Phosph.;* sensitiveness of the **region of the liver**, *China*, *Bry.*, *Lyc.*, *Bell.*, *Laches.;* **painfulness of the umbilical region**, *Ipec.*, *Nux v.;* **urine is emitted** at every turn of cough, *Caust.*, *Puls.*, *Staphys.*, *Phosph.*, *Natr. mur.*, *Caps.;* the **inguinal hernia** is painful, *Nux v.*, *Verat. alb.*, *Silic.*, *Sulph.;* the **larynx** is painful, *Acon.*, *Arn.*, *Bell.*, *Hep.*, *Caust.*, *Calc.*, *Carbo veg.*, *Arg.*, *Phosph.*, *Laches.;* **spasm** in the larynx, *Ipec.*, *Ignat.*, *Hyosc.*, *Bell.;* **pains in the chest** generally, *Acon.*, *Bry.*, *Bell.*, *Ipec.*, *Carbo veg.*, *China*, *Staphys.*, *Phosph. ac.*, *Kali carb.*, *Nitr. ac.*, *Nitr.*, *Caust.*, *Lyc.*, *Phosph.*, *Puls.*, *Stann.;* **burning** in the air-passages, *Carbo veg.*, *Caust.*, *Spong.*, *Sulph.;* **pressure** in the affected parts, *Bell.*, *Sulph.;* **ulcerative pain** in these parts, *Calc.*, *Silic.*, *Phosph.*, *Hep.*, *Kali carb.*, *Laches.;* **stitches** in these parts, *Bry.*, *Bell.*, *Sulph.*, *Verat. alb.*, *Arsen.*, *Phosph.*, *Petrol.*, *Caps.*, *Carbo veg.*, *Kali carb.*, *Nitr.;* pain as if **sore, raw** in these parts, *Caust.*, *Nux v.*, *Ipec.*, *Sulph.*, *Carbo veg.*, *Phosph.*, *Bell.*, *Stann.*, *Arg.;* **mucous rales**, *Ipec.*, *Tart. emet.*, *Calc.*, *Caust.*, *Cham.*, *Bell.*, *Puls.;* **arrest of breathing**, *Ipec.*, *Cina*, *Cupr.*, *Ars.*, *Tart. emet.*, *Dros.*, *Bell.*, *Silic.;* **wheezing** in the air-passages, *Laches.*, *Bry.*, *China*, *Sulph.*, *Kali carb.*, *Dros.;*

**palpitation** of the heart, *Puls.*, *Arsen.*, *Sulph.*, *Arn.*, *Calc.*, *Nitr.*, *Natr. mur.;* **shortness of breath,** *Sulph.*, *Rhus t.*, *Silic.*, *Calc.*, *Ars.*, *Arn.*, *Carbo veg.*, *Caust.;* **dyspnœa,** *Ipec.*, *Sulph.*, *Kali carb.*, *Laches.*, *Cupr.*, *Lyc.*, *Sep.*, *Puls.;* **rheumatic pains** in the limbs, *Caust.*, *Puls.*, *Bry.*, *Acon.*, *Caps.*, *Rhus t.*, *Sulph.;* **night-sweats,** *China*, *Carbo veg.*, *Ars.*, *Silic.*, *Rhus t.*, *Kali carb.*, *Phosph.*, *Sulph.*, *Calc.;* **hands sweaty,** *Tart. emet.;* **sweat** about the **head,** *Tart. emet.*, *Ipec.;* great **weakness** and lassitude after the paroxysms, *Ipec.*, *China*, *Verat. alb.*, *Arsen.;* **moaning,** weeping, *Arn.*, *Hep.*, *Cina;* **sneezing,** *Bell.*, *Hep.*, *Cina.*

Note: Compare page 198, **Catarrh of the air-passages.**

## CHAPTER XXI.

## DIFFICULTIES OF THE RESPIRATION, PULMONARY AFFECTIONS, DISEASES OF THE HEART.

### 1. Difficulties of the Respiration.

1. **Spasmodic asthma of adults.**—In this affection I always commence the treatment with *Ipec.*, which very soon diminishes the intensity and frequency of the attacks, after which, especially if the patients complain of continued oppression and tightness of breathing between the paroxysms, and are troubled with expectoration of a tenacious bronchial mucus, I give a dose of *Sulph.* with excellent effect, which I allow to act for several weeks. If, after this period, the patient still complains of dyspnœa, I administer a dose of *Ars.*, more particularly if the paroxysms occur principally **in the evening** after the patient has **gone to bed,** or *Laches.*, if they are worse **after sleep**; if the paroxysms increase from evening till morning, with a good deal of mucous rattling in the throat, *Tart. emet.*, and *China* very often relieve this condition. If the asthma is complicated with chronic bronchial catarrh, I have so far derived most benefit, beside *Ipec.* and *Sulph.*, from *Tart. emet.*, *Cupr.*, *Puls.*, *Ars.*, *Carbo veg.;* if the asthma is of a rather nervous character, a sort of **nervous spasm** of the chest, from *Ipec.*, *Nux v.*, *Cupr.*, *Verat. alb.*, *Sep.*, *Laches.*, *Ars.* [also *Lobel. inflata.* H.]; if the asthma is complicated with **organic disease of the heart,** from *Kali carb.*, *Spong.*, *Laches.*, *Lyc.*, *Ars.*, *Aur.* If complicated with **rush of blood to the chest,** from *Nux v.*, *Fer.*, *Bry.* or *Bell.;* in the case of **hæmorrhoidal** individuals, from *Nux v.*, *Sulph.* If **suffocative** paroxysms set in, I likewise give at once *Ipec.*, and likewise with equally good success *Ars.* or *China*, and if these are not sufficient, *Verat. alb.* or *Cupr.* Spasms of the chest in the case of hysteric females, where *Ipec.*, is not sufficient, are often relieved by *Ignat.*, *Cham.*, *Bell.*, *Coff.*, *Acon.*, *Calc.*, *Puls.*, *Phosph.* For asthmatic complaints after suppression

of ulcers or eruptions I give first of all *Arsen.* or *Sulph.*, and sometimes *Bry.* or *Rhus t.* after exanthems; sometimes, after rash, *Ipec.*, *Puls.*, *Verat. alb.* Finally, if the paroxysms are excited or aggravated by motion, *Bell.*, *China.*, *Verat. alb.*, *Ars.;* if by ascending an eminence, *Arsen.*, *Calc.;* if by a fit of anger or chagrin, *Cham.*, *Bry.*, *Ars.*, *Staphys.;* if by the least bodily exertion, *Ars.*, *Calc.;* if relieved by bending forward, *Nux vom.*, *Laches.*, *Ars.*

2. **Angina pectoris,** neuralgia cordis.—This disease, which has only occurred to me once in its true form during the whole course of my practice, and for which various homœopaths of the Paris Eclectic School have proposed all sorts of remedies, except those that are the only right ones, was cured very rapidly by means of *Arsen.*, *Spong.* and *Verat. alb.* This patient was over sixty years old, arthritic, and affected with ossification of the valves. From time to time, especially when walking, and sometimes at night, he was suddenly attacked with tightness about the heart, pressure on the chest, difficulty of breathing and a suffocative constriction of the chest which sometimes became so distressing that he perspired from agony and became weak even to the degree of syncope. A single dose of *Ars.* 30th, two globules, given during the paroxysm, relieved it almost immediately, and six months elapsed before another attack set in, whereas heretofore the paroxysms had occurred every week. For the second attack I again gave *Ars.* 30th, which indeed relieved the paroxysm immediately, without however preventing a return five days after. I now gave him *Verat. alb.*, after which the patient again enjoyed a free interval of six months. I now again returned to *Ars.*, followed by *Verat. alb.*, but was unable to obtain the same results as formerly, and therefore resorted to *Spong.* There was again a free interval of six months, after which I again gave *Ars.* for another paroxysm; this remedy now acted as the first time with such radical effect that the patient remained free from any further attacks for two years, when he died of pneumonia on one of his journeys, under allopathic treatment. [For angina pectoris depending upon fatty degeneration of the heart, *Gelsem.* and *Bell.* are good palliatives. H.]

3. **Asthma Millari of children.**—This affection, which resembles spasm of the glottis, and is sometimes confounded with

croup, consists rather in a general spasm of the chest; from croup it is distinguished at the outset by a complete absence of all inflammatory symptoms; from the spasm of the glottis it is distinguished by the circumstance that the dyspnœa or rather apnœa is not experienced in the throat, but rather in the chest, and the voice is rather deep and hollow than hissing and crowing. If *Samb.* can be given at once, at the very moment when the child starts up from his sleep, with suffocative distress and a blue countenance, this remedy often affords immediate relief, and if not sufficient, *Ipec.* or *Ars.*, and still more frequently *Cupr.* may be relied upon. See also **spasm of the glottis** in the previous chapter, Article 1, No. 6.

4. **Chronic dyspnœa** without spasmodic paroxysms.—This affection, which most generally befalls people of a more advanced age, originates in chronic catarrh of the air-passages, and is most commonly aggravated in the fall and spring of the year, especially in damp and foggy weather. The chief remedies for it are *Sulph.* or *Calc.*, and likewise *Laches.*, *China*, *Carbo veg.*, *Cupr.*, *Kali carb.* and *Silic.*

## 2. Various Affections of the Lungs and Pleura.

1. **Pleuritis, pleurisy,** inflammation of the pleura.—After a severe chill followed by intense fever, the patient is attacked with a violent cough with more or less bloody expectoration, and a seated and very distressing stitch in the side. If we are called in time, the whole trouble is sometimes removed as by magic within 24 or 48 hours, by means of *Acon.* 30th, two globules in a few tablespoonfuls of water, of which a teaspoonful is given every two or three hours. If this is not sufficient, *Bry.* is to be given in the same way, and if the violent stitches continue nevertheless, *Kali carb.* and sometimes *Nitr.* Unfortunately we are not always called before the stage of serous effusion has set in. If recent, *Sulph.* still helps very promptly, after *Tart. emet.* had been tried without effect. If the effusion has progressed a good deal, and neither *Sulph.* nor *Tart. emet.* has any effect upon it, *Ars.*, *Carbo veg.* or *Squills* often afford relief. For remaining chronic pains in the side or dullness of percussion *Calc. carb.* and *Sulph.* often prove

specific remedies, unless they had been made use of at a previous stage of the treatment, in which case *Bry.* and *Tart. emet.* may again be resorted to as excellent intercurrent remedies that will predispose the organism for another dose of *Calc.* and *Sulph.*

2. **Rheumatic pleurisy.**—This is an affection of the intercostal muscles. It sometimes sets in with febrile motions, shifts its place more or less, and yields in most cases to *Arn.* Very often, however, this remedy leaves us in the lurch, and *Bry.*, *Rhus t.*, *Nux v.* or *Lyc.* will have to be resorted to, [also *Cimicifuga racem.* H.]

3. **Pneumonia, inflammation of the lungs.**—In the first stage of this disease, that of splenization, when the percussion-sound is still clear, and crepitating rates are distinctly audible during an inspiration and during cough, *Acon.*, given in water as above, can do a great deal towards cutting the whole disease short. If this does not effect speedy relief, I know of no better remedy than *Sulph.* 30th, three globules in a few spoonfuls of water, a teaspoonful every three hours, which has to be continued for at least twenty-four hours and longer if the improvement continues to progress. If the case gets worse again after *Sulph.*, and *Acon.* had improved it a trifle at the beginning, this medicine may be resumed for 24 hours and even longer, if the symptoms continue to improve under it. If diarrhœa supervenes, *Sulph.* is indicated above every other remedy, and sometimes *Rhus t.*, if *Sulph.* does not arrest the diarrhœa entirely; neither *Bry.* nor *Arn.* is indicated by such symptoms unless they are complicated with pleuritis. Very often *Bell.* is suitable at this stage if neither *Acon.* nor *Sulph.* helps, or if cerebral symptoms supervene, in which case *Hyosc.*, and sometimes even *Arsen.* and *Phosph.* render good service, more particularly if the patient lies in a state of stupor and unconsciousness. If the inflammation has entered upon its second stage, that of hepatization, with a dull percussion-sound without resonance, and bronchophony, *Sulph.* is the chief remedy, unless it had been exhibited previously, next to which we have *Phosph.*, *Laches.*, *Tart. emet.*, *Ars.* and *Rhus t.*, according to the complications in No. 4. If the third stage has arrived, with purulent dissolution of the exudation, *Phosph.* and *Laches.* again are the chief remedies unless *Sulph.* should deserve a preference in case tubercles are

present. If **paralysis** of the lungs threatens at this stage, *Tart. emet.* is the main remedy; if **gangrene** has set in, or threatens to set in, with ichorous expectoration, *Ars.* and *Carbo veg.*, and sometimes *China* and *Silic.* are the chief remedies. If in neglected cases a chronic purulent expectoration remains, one of the most effective remedies is *Lyc.*, and very often *Sulph.*, or, if this should prove ineffectual, *Phosph.* or *Ars.* In all neglected cases of long standing *Sulph.* renders the most eminent service. In this suppurative stage *Rhus t.*, *Bell.*, *Merc.* are sometimes useful, according to the complications indicated below in No. 4. For the pneumonia of **old people,** *Tart. emet.*, *Phosph.*, *Kali nitr.* are often excellent; in the case of **asthmatic** persons, *Sulph.*, *Laches.*, *Phosph.*, *Carbo veg.*, *Ars.;* after suppressed **menses,** *Puls.*, *Lyc.;* after copious **venesection,** especially, *China*, *Acon.*, *Sulph.*, *Rhus t.*, *Carbo veg.*, *Ars.* [*Verat. viride*, in tolerably large doses, has cured hundreds of cases of pneumonia. H.]

4. **Complications of pneumonia.**—Pneumonia with **cerebral irritation** requires *Bell.*, *Phosph.*, *Rhus t.*, *Hyosc.*, *Ars.* [also *Verat. vir.* H.]; with **bronchial catarrh,** very often *Merc.*, *Puls.*, *Cann.* or *Nux v.;* with **bilious** complaints, and a yellow, bilious expectoration, above all, *Tart. emet.*, and sometimes *Nux v.*, *Puls.* or *China;* with **pleuritis** (peripneumonia), if *Acon.* and *Sulph.* have no effect in the first stage, *Bry.* may be used with good effect, but *Merc.* and *Tart. emet.* are often still more effectual. For great weakness after venesection, according to the stage, I give *Acon.*, *China*, *Rhus t.*, *Carbo veg.*, *Ars.;* for **typhoid** symptoms during the suppurative stage, above all, *Rhus t.*, likewise *Phosph.*, *Ars.*, *Carbo veg.;* for **sudamina** especially, *Ars.*

5. **Asthenic pneumonia.**—This form of pneumonia, which must not be confounded with **typhoid** pneumonia, generally attacks people that have already had several attacks of pneumonia, and have been very much weakened by venesection. It is characterized by a soft, quick and small pulse, with anxiety and a feeling of weight in the lungs rather than stinging pains, together with a short cough and expectoration of bloody saliva, and finds its chief remedy in *Merc.*, or, if this does not help, in *China*, *Ipec.* or *Verat. alb.*, or, if the pneumonia threatens to terminate in **gangrene,** in *Carbo veg.* or *Ars.* If there is a good deal of spasmodic

irritation on the chest, with the pneumonia, *Bell.* or *Ipec.* often helps, and if **paralysis** of the lungs threatens, *Verat. alb.* or *Ars.*

6. **Pneumonia occulta,** lentescent pneumonia.—In this form of pneumonia, which generally befalls old people and is apt to terminate in paralysis of the lungs or suffocative catarrh, and which frequently sets in under the mask of an inconsiderable bronchial catarrh with slight chilliness and heat, we must not depend upon the remedies extracted by Rueckert from Hartmann's Therapeutics. Neither *Arn.* nor *Bry.* nor *Senega* is truly specific in this case, but *Sulph.* and *Carbo veg.* and above all, *Tart. emet.*, which alone once afforded speedy and radical relief in the case of a man 80 years old, where the remedies, usually recommended for such a disease, remained utterly ineffectual. In most other cases I have seen the best curative effects from *Sulph.*, after which the remaining symptoms speedily yielded to *Carbo veg.*, *Phosph.* or *Laches.*

7. **Typhoid pneumonia.**—This form of pneumonia, which generally likewise creeps along slowly, with general lassitude and a sensation of an impending illness, and which, at its acme, is characterized by typhoid symptoms, such as delirium, sopor, apathy, insensibility etc., is often cured by *Rhus t.* and *Hyosc.;* if the patient has involuntary discharges of stool and urine, *Arn.* is one of the best remedies; if the weakness increases nevertheless, *Arsen.* or *Verat. alb.* So far *Ipec.* has been totally ineffectual in my hands in typhoid pneumonia; in one case, where no remedy seemed to do the least good, I obtained a speedy and radical change by means of *Sulph.*, and in another case from *Phosph.* If the tongue turns black, and neither *Rhus* nor *Arsen.* effects a change for the better, *Carbo veg.* sometimes has a good effect.

8. **Pulmonary Hæmorrhage.**—We have to distinguish **blood-spitting** or hæmoptysis and **hæmorrhage** from the lungs. In the former, where a **bloody mucus** or even **pure blood** is coughed up, but in small quantity, and where a tubercular affection of the lungs need not necessarily be suspected as the primary cause of the difficulty, but where the accident may be traced to a simple **rush of blood** to the chest, *Acon.* 30th, a teaspoonful of a watery solution morning and evening, always abates and sometimes

arrests the disorder entirely; if *Acon.* does not help, I give in recent cases *Fer.*, *China* or *Ipec.*, [also Squills, H.], and in chronic cases, or if the above-mentioned remedies do not help, *Ars.*, *Arn.* or *Sulph.* If a real hæmorrhage takes place, I usually give *Ipec.* at once, and if this does not help speedily, *China*, *Fer.*, *Bry.*, or even *Acon.*, *Arn.* and *Ars.*, according as indicated by the following conditions. In the case of **drunkards** I use *Nux v.*, *Arsen.*, *Opium*, *Hyosc.;* for suppressed **hæmorrhoids,** *Nux v.*, *Sulph.*, *Carbo veg.*, *Lyc.*, *Phosph.;* when the menses are disturbed, suspended, *Puls.*, *Cocc.*, *Ipec.*, *Bell.*, *Phosph.*, *Verat. alb.;* in the case of **tuberculous individuals,** *Phosph.*, *Arn.*, *Acon.*, *Sep.;* after **mechanical** injuries, *Arn.*, *Ipec.*, *Ruta;* after **venesections,** *China*, *Fer.*, *Ipec.;* if the blood is raised with a **titillating cough,** *Arn.*, *Bell.*, *Nux v.;* even after a little **hawking,** *Acon.*, *Ipec.*, *Nux v.*, *Sulph.*, *Ars.;* by a **dry cough,** *China*, *Hyosc.*, *Fer.*, *Arn.*, *Arsen.;* a **violent, rough** cough, *Carbo veg.*, *China*, *Dros.;* a **racking** cough, *China*, *Ipecac.*, *Nux v.;* if the blood comes without cough and as if **vomited** up, *Ipec.*, *Arn.*, *Phosph.*, *China*, *Ars.*, *Fer.;* if the attack is more violent **at night,** *Fer.*, *Puls.*, *Rhus t.*, *Sec.*, *Hyosc.;* worse during **rest,** *Rhus t.*, *Dulc.;* worse after **exercise,** *Fer.*, *Bry.*, *China*, *Bell.;* after **talking,** *Phosph.*, *Fer.;* in the **morning** especially, *Phosph.*, *Ars.*, *China*, *Nux v.;* if the blood is **bright-red,** *Dulc.*, *Rhus t.*, *Acon.*, *Arn.*, *Bell.*, *Fer.*, *Ipec.*, *China*, *Ars.;* if the blood is **dark,** blackish, *Puls.*, *Arn.*, *Sec.;* if slimy, **viscid,** thick, *Opium*, *Rhus t.*, *Arn.;* if there is a good deal of **hoarseness,** *Phosph.*, *China*, *Sulph.;* **rush of blood** to the chest, *Acon.*, *Arn.*, *Bell.*, *Phosph.*, *Opium;* oppression on the chest, **dyspnœa,** *Phosph.*, *Opium*, *Fer.;* **burning** on the chest, *Carbo veg.*, *Arn.*, *Ars.;* **pressure** on the chest, *Sulph.;* pain under the **sternum,** *Sulph.;* in the **lower part** of the chest, *Puls.*, *Rhus t.*, *Sec.;* **palpitation** of the heart, *Acon.*, *Ars.*, *Phosph.*, *Bry.*, *Arn.*, *Sulph.;* pain between the **scapulæ,** *Ars.*, *Fer.*, *China;* **congestion of the head,** *Bell.*, *Arn.;* **pallor** of the face, *Fer.*, *Carbo veg.*, *Ars.*, *China;* **flushed** face, *Bell.*, *Acon.*, *Op.*, *Nux v.;* **coldness** of the skin and extremities, *China*, *Carbo veg.*, *Ars.;* **weakness,** syncope, *Arn.*, *Ars.* In the case of phthisicky persons, hæmorrhages, if occurring repeatedly, and with increasing violence, finally result fatally in spite of all treatment. The most effective palliatives in such cases are *Fer.*, *Ipec.*, *Carbo veg.*, *Phosph.*, and sometimes *Ars.*, if *Acon.*, *Ipec.* and *China* are insufficient to arrest these violent hæmorrhages. *Kreas.*, *Ledum* and *Millef.* have afforded me a transitory benefit in such cases.

9. **Pulmonary phthisis.**—There are people who do not recognize any other diagnostic sign of consumption than the fatal termination of the disease, and who, even in cases where tubercular suppuration and even caverns exist that had been healed by appropriate treatment, are very willing to admit the existence of a vomica, but not consumption, for the reason that, in their opinion, consumption is an incurable malady. If by pulmonary phthisis we understand the last stage of the tubercular inflammatory process, where the ulcerous destruction is so far advanced that the process of sanguification is absolutely prostrated and the lungs are almost destroyed, those who do not believe in the curability of consumption, are undoubtedly correct in their opinion, and no homœopath has ever achieved a cure at this stage of the disease, nor will ever anybody pretend to cure it, for the simple reason that there is not anything left to cure. But if, by tubercular consumption, not exactly including the period of incipient phthisis, we understand the tubercular destructive process from the moment when a light and scarcely noticeable fever attacks the patient, attended with a dry cough or a cough with purulent expectoration, and the respiratory murmurs incident to the presence of tubercles, I am prepared to assert that I have cured more than once a pulmonary consumption that had already passed into its first, fully-developed stage. Even in the second stage, that of softening of the tubercles, with expectoration of bloody mucus, I have effected cures, and in the third stage or that of suppuration and colliquation, I have at least relieved the patients and have kept them alive for 18 to 20 months, although this last stage, if it has once set in, scarcely ever lasts longer than a year. The most dangerous symptoms, are those that manifest themselves about the 7th, 14th, 21st, 28th, 35th, 42d, 49th, 56th, 63d, etc. years, and among these the worst symptoms occur about the 22d, 28th, 14th, and above all, about the 63d year. The other ominous sevens are of less importance, and the phthises occurring in those periods, can be cured much more easily, whereas those which occur in the 21st and 22d year are the most dangerous, and likewise those which befall young people of the ages of 14 or 15 years; cases of phthisis that break out at the age of 63, are more dangerous than any for the reason that tuberculous patients who had hitherto resisted every inroad of the disease, as a general rule have to forfeit their lives as a tribute to the destroyer. For incipient phthisis with pains between the shoulder-blades or in the

region of the clavicle, a frequently-returning, dry and occasionally moist cough, setting in more particularly in the evening at bed-time or early in the morning after the patient had left his bed, and only seldom results in the expectoration of a few blood-streaked sputa, the following are the remedies that have so far proved of the greatest efficacy in my hands: *Puls.*, *Bry.*, *Nux vom.*, *Sulph.*, *Calc.*, *Lyc.*, *Phosph.*, and these are the remedies of which I make the most frequent use even to this day. To women I give with the best success *Puls.*, especially if they are chlorotic, are troubled with leucorrhœa and have scanty menses; there is more or less expectoration of mucus which is somewhat streaked with blood; or *Bell.* if the cough is of a spasmodic character and *Puls.* has no further effect. In the case of young men, if the cough is moist, I first give *Bry.*, and if the cough is spasmodic, *Carbo veg.* If the cough is quite dry, I give to women *Bry.*, and *Nux v.* to men according to circumstances. In their case other remedies may likewise be required, such as *Acon.*, *China*, *Ipec.*, *Hep.*, *Spong.*, *Dros.*, according to the indications given in Chapter XX. 2, 5–7; by pursuing this course I have restored many young people who were supposed to have confirmed consumption, in a short time, to such a degree that nothing could be perceived of their previous condition except a disposition to take cold, or a slight, scarcely perceptible hacking cough. If this disguise is reached, I give, if no other indications prevail, *Sulph.*, *Calc.*, *Lyc.*, very often in this succession, allowing each remedy to act for some time, giving two or three doses of the same remedy during the first week. By this means I attain my object in many cases, sometimes by means of *Sulph.* and *Calc.* alone, or sometimes, if these remedies are indicated by the character of the cough, *Hep.*, *Spong.* or *Dros.* (see Chap. XX. 2, 5–7). In confirmed phthisis, with hectic fever and expectoration of pus during the cough, I pursue the same course. In this stage, especially in the case of females, I likewise prefer commencing the treatment with *Puls.* or *China*, and in the case of young men with *Phosph. ac.*, or *Hep.;* with these remedies, and not unfrequently with *Dros.*, *Spong.*, *Carbo veg.* and *Bry.*, I often succeed in a short time in improving the condition of the patients, so that *Sulph.*, *Calc.* and *Lyc.* again come into play. If the purulent expectoration at this stage is more or less profuse, and *Puls.*, *China* or *Phosph. ac.* do not very soon superinduce a decided commencement of improvement in the patient's condition, I gener-

ally have at once recourse to *Calc.*, after which, if it should prove insufficient, I usually give *Lyc.* and afterwards *Silic.* or *Kali carb.*, and at a later stage *Nitr. ac.* This plan of treatment, so far as the successive exhibition of remedies is concerned, is of course subject to many modifications in special cases, according as the symptoms manifesting themselves during the course of the disease, differ in their progressive development or even at the outset of the malady; in accordance with these symptoms, I give, if **inflammatory** symptoms are present, *Acon.*, *Bry.*, *Bell.*, *Spong.*, *Dros.*, *Nitr.;* if the **expectoration** is rather **purulent,** mucous, bloody or foul, or the **cough** is dry, spasmodic etc., in accordance with the indications furnished in Chapter XXI. 2, 5, but select more particularly from among *Bry.*, *Calc.*, *Dros.*, *Hep.*, *Kali carb.*, *Lyc.*, *Nux vom.*, *Bell.*, *Phosph.*, *Silic.*, *Sulph.*, *Carbo veg.*, *Spong.*, *China*, *Fer.*, *Laches.;* if **hæmorrhages** set in, from among the same remedies, in accordance with the indications given above under No. 8. If vomiting of the **ingesta** sets in, *Calc.*, *Fer.*, *Kali carb.*, *Silic.;* If **diarrhœa** supervenes, *Fer.*, *Phosph.*, *Sulph.*, *Lyc.*, *Puls.;* if much **leucorrhœa** is complained of, *Puls.*, *Lyc.*, *China*, *Fer.*, *Sulph.*, *Calc.*, *Sepia;* if the **feet** are very much swollen, *Sulph.*, *Fer.*, *Kali carb.*, *China;* if the patient complains of **sleeplessness,** *Sulph.*, *Lyc.*, *Calc.*, *Phosph.*, *Bell.;* if the patient complains of **chilliness,** *Puls.*, *Calc.*, *Lyc.*, *Phosph.*, *Sulph.;* if of exhausting **sweats** early in the **morning** and **at night,** *Calc.*, *China*, *Dulc.*, *Carbo veg.*, *Lyc.*, *Phosph.*, *Stann.*, *Sulph.* As regards the curative virtues of other remedies recommended for pulmonary phthisis, such as *Kreas.*, *Iod.*, *Psorin*, *Samb.*, *Plumb.*, *Kali hyd.*, *Merc.*, *Sanguin.*, *Brom.*, *Ledum*, I cannot speak from experience, and, in cases where I have used them as intercurrent remedies, they have never shown any marked influence over the consumptive process.

10. **Phthisis florida, granulata,** galoping consumption.—This form of consumption, which occurs most frequently among chlorotic young girls, or, in the opposite case, among plethoric and rosy-cheeked girls, or after confinement, in consequence of excessive nursing, after great loss of blood, self-abuse etc., and often terminates fatally in a few months after its first outbreak, has in reality nothing in common with the ordinary tubercular consumption, but depends upon the inflammation and liquefaction of fine **granular, gray bodies** in the lungs, whereas

tubercles constitute **larger, yellow** indurations. It is possible, that after these granulations have attained a certain size, number and maturity either in consequence of an active (hypersthenic) or passive (asthenic) rush of blood to the chest, they become inflamed and liquefy; hence the rapid course of this disease, which sometimes sets in all of a sudden in cases where no trace of it was suspected. Be this as it may, even in this disease I have obtained very fine curative results not only if the disease had not yet broken out, but even in cases where the disease had already made some headway, more particularly if I had a chance to observe the first suspicious symptoms, a dry cough with shooting pains in the chest, or a pressure between the shoulder-blades, circumscribed redness of the cheeks, in the case of plethoric young girls with profuse menses, to whom I gave *Acon.*, *Bell.* and *Calc.*, and likewise in opposite cases, after debilitating causes or in the case of feeble individuals, chlorotic patients etc., where *Puls.*, *China*, *Fer.*, *Phosph. ac.* and *Lyc.* were principally depended upon; the last-named remedy has always proved very useful in such cases, if the expectoration was **gray** and had a **saltish** taste. *Dros.*, *Merc.*, *Sulph.* and *Calc.* have likewise been employed by me with great benefit in this disease; *Spong.*, *Stann.*, *Mangan.*, *Lauroc.*, *Digit.*, *Caust.*, *Bry.* and *Arn.* have never effected even a sign of essential improvement.

11. **Phthisis mucosa et pituitosa.**—This form of phthisis is probably nothing else than a disorganizing affection of the bronchial mucous lining of older persons superinduced by slowly-progressing tubercular destructions; instead of expectorating, as young phthisicky individuals do, detached little lumps of mucus, older persons raise large masses of a tenacious, thick, viscid mucus. So far at least I have never yet met with a case of mucous phthisis with the expectoration just described without at the same time, if hectic fever was present, discovering old tubercular destructions and caverns in the lungs. For this reason the so-called pulmonary blennorrhœa of old people is always a more or less suspicious phenomenon, although such a blennorrhœa likewise not unfrequently proceeds from a **chronic** but **simple** inflammation or even a simple weakness of the mucous lining consequent upon frequent or chronic catarrhs. If these blennorrhœas of the bronchia have become associated with hectic fever, the

patient can indeed be relieved by such medicines as *Phosph.*, *China*, *Puls.* and *Dulc.*, and his existence can be protracted to some extent, but death is inevitable. The case is different if the expectorated mucus has not yet become tenacious and hard, the strength is still good, no febrile symptoms have yet set in, and the whole case has the appearance of a neglected catarrh. In most cases of this kind, especially if the patients are advanced in age, *Sulph.* is much more useful than *Stann.* which seems to correspond more with the pulmonary blennorrhœa of persons between 30 and 50 years of age. In such cases I have often used with great success *Lyc.* as well as *Phosph.*, and no less *China* and *Dulc.*

### 3. Diseases of the Heart.

1. **Inflammations.**—In true inflammation of the heart (carditis, pericarditis) *Acon.* 30th, as usual in a watery solution, generally accomplishes every thing that can be desired, and, if no rheumatism is at the bottom of the disease, is often alone sufficient to cure the pericardial inflammation. If symptoms remain after *Acon.*, they yield mostly to *Bry.*, *Puls.* or *Bell.* If effusions in the pericardium set in, and *Arsen.* does not remove them entirely, *Glonoin*, *Apis*, *Kali carb.*, *Colch.* or even *Lyc.* do a great deal more good than *Dig.*, from which I have so far only derived a short, palliative improvement in cardiac affections, not much better than from *Brom.* and *Iodine.* For violent congestions of the heart, which sometimes precede an inflammation, *Acon.* is the first remedy, after which, if the former proves insufficient, *Bell.*, *Phosph.*, or *Aur.* may be depended upon. For cardiac inflammations consequent upon suppression of cutaneous eruptions, ulcers or foot-sweats, *Sulph.* or *Ars.* may prove effectual.

2. **Endocarditis, rheumatism of the heart.**—If endocarditis is the result of a rheumatic metastasis, *Acon.* likewise helps in very many cases, but never as perfectly and reliably as in simple inflammation. Very often in such cases, we accomplish our purpose by means of *Bell.*, *Bry.*, *Puls.* or *Spig.;* but I have treated a case of rheumatic endocarditis, with violent hæmorrhage from the nose and mouth, where *Acon.*, *Bell.* and *Bry.* quieted the heart's tumult for a while, but allowed the hæmorrhage to continue

uninterruptedly, until I gave a dose of *Phosph.* 30th, two pellets, which very soon effected a visible diminution of the flow of blood, after which a dose of *Ars.* completed the cure; whereas in the case of a girl who had had an attack of acute rheumatism every two years since her twelfth year, and whose heart had become affected during the third attack, *Acon.*, *Bry.*, *Bell.*, *Cocc.*, *Phosph.*, *Laches.* and *Spig.* remained utterly without effect; *Colch.* very speedily broke the violence of the disease and improved it so that *Bell.* and *Laches.* easily removed the remainder. In more chronic cases I have administered *Aur.* with a good deal of benefit, likewise *Calc.*, *Ars.*, *Rhus t.*

3. **Palpitation of the heart.**—If the palpitation is caused by rush of blood to the heart, *Acon.* likewise helps in very many cases, or, if *Acon.* does not afford any relief, *Bell.*, *Nux v.*, *Aur.* or *China*, and likewise *Arsen.* and *Sulph.* will frequently remedy the trouble; if caused by **debilitating** influences, self-abuse, loss of blood, *China* and *Fer.* help; in the case of nervous, hystericky persons, more especially, *Ignat.*, *Cocc.*, *Puls.* or *Phosph.* For **chronic** palpitation of the heart, beside *Sulph.*, *Ars.*, *Aur.*, *China*, very often, *Natr. mur.*, *Phosph.*, *Calc.*, *Petrol.* and *Nitr. ac.* For palpitation caused more particularly by going up an **eminence**, *Sulph.* and *Nitr. ac.*, or even *Thuja* relieve sometimes; if it occurs especially **at night**, *Ars.*, *Puls.*, *Phosph.;* if **after eating**, more particularly, *Carbo veg.*, *Phosph.*, *Lyc.;* if it is accompanied by great **anxiety**, *Acon.*, *Ars.*, *Verat. alb.*, *Spig.*, *Aur.*, *Puls.;* if by **syncope**, weakness, *Arsen.*, *Verat. alb.*, *Ignat.;* by great **dyspnœa**, *Acon.*, *Bell.*, *Nux v.*, *Phosph.*, *Spig.*

4. **Neuralgia of the Heart.**—See above, Art. 1. No. 2: angina pectoris.

5. **Hypertrophy of the heart.**—In this disorder I have never yet seen decided effects either from *Acon.* and *Asparagus*, or from *Bism.*, *Graph.*, *Kali hydr.*, *Prunus* or *Verat. alb.;* *Puls.*, *Calc.*, *Spig.*, *Arsen.*, *Lyc.*, *Kalmia*, have rendered me more than once excellent service. **Dropsy** resulting from inveterate hypertrophy has yielded in my hands to *Lyc.*

6. **Aneurism of the heart.**—If the disease has not

progressed too far, *Ars.* and *Carbo veg.* do more than any other medicine: *Spig.*, however, has had a good effect in some cases.

7. **Valvular disease.**—Before Hering published his article on *Spong.* in the All. Hom. Zeitz., my attention had been directed to this remedy by one of our American colleagues. In more than one case of valvular disease I have had repeated opportunities of verifying the symptom pointed out by Dr. Wells: **"Starting from sleep at night in affright, with fear of suffocation."** Even in a case of inveterate angina pectoris complicated with valvular disease (see above 1, No. 2), this remedy afforded considerable relief, although *Ars.* did more for the angina pectoris itself. For **thickening of the valves,** *Spig.* and *Kalmia* are very efficient remedies; *Spig.* especially is excellent in thickening and ossification of any part of the heart. [The reader is reminded of the new remedy *Cactus grandiflorus* for heart-disease. H.]

8. **Cyanosis.**—*Digit.* is very useful in this disease, especially in the case of new-born infants; *Sulph.* and *Calc.* are still better.

Altogether the remedies that have been recommended theoretically for heart-disease, more especially *Iodine* and *Digit.*, have disappointed me; these two remedies in my hands had to be given in large doses and then had only a palliative effect; hypertrophies were even made worse by them. Whenever I have seen these two remedies employed by homœopaths in large doses I have been able to predict bitter disappointments.

## CHAPTER XXII.

## NAPE OF THE NECK, BACK AND SMALL OF THE BACK.

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1. **Myelitis, inflammation of the spinal cord.**—Genuine myelitis, which seems to be a rare disease, has only occurred to me twice in the course of my long practice; the first time in Liege, in the case of a servant-girl, who took cold in severe winter weather while she had her courses, and who was speedily relieved by *Dulc.;* the second case was that of a countryman in the region of the Pyrenees who, while perspiring on a hot summer's day, was suddenly overtaken by a heavy rain and drenched to the skin. Next morning he had an intense fever, his lower extremities were almost paralyzed, and he lay in his bed motionless. *Rhus* helped him as speedily as *Dulc.* helped the girl. It is doubtful whether, beside **softening** of the spinal cord, there is a chronic inflammation of the cord and its membranes, unless we choose to apply the name **myelitis** to spinal irritations which are commonly of a rheumatic origin; this would be following the French fashion, according to which almost all diseases of any organ are made to terminate in **itis.**

2. **Spinal Irritations, stiffness of the nape of the neck.**—Spinal irritations generally manifest themselves as painful rigidity of the nape of the neck, as lumbago or as pains in the small of the back. As regards the last-mentioned pains, it is difficult to distinguish them from similar pains occasioned by hæmorrhoids or menstrual irregularities, since even in true spinal irritation the much-vaunted symptom of **formication** in the corresponding extremities is absolutely wanting, and only occurs in genuine myelitis, softening or other disorganizations of the spinal cord. Be this as it may, if such spinal irritations were attended with painful rigidity of the nape of the neck, and of recent origin, I have cured them with *Acon.*, *Bry.*, *Bell.*, *Kali carb.* and *Lyc.*, and

if the neck was at the same time twisted, with *Caust.*, *Calc.* and *Ars.* For **lumbago** and **backache** we refer the reader to the next numbers.

3. **Lumbago.**—The specific remedy for this disease is not *Puls.*, as was formerly supposed, but *Rhus t.;* so far I have cured almost every case that I have had to treat, with *Rhus* in three to four days, except perhaps two or three cases where I had to complete the cure with *Puls.* Even in one case where a young man had been treated for a whole month for lumbago by means of subcutaneous injections of Morphia, and where nothing was accomplished by this treatment beside adding to the lumbago a dull and continued distress in the lower abdomen; *Rhus* relieved this patient, who had borne the old and the new pains for two months, to such a degree that he gained courage and hope and I gained time to further combat this complicated affection with *Bell.*, *Nux v.* and *Plumb.*, until nothing remained but a dull lumbago, which, after the abdominal pains had entirely left him, yielded in less than three days to a single dose of *Rhus* 30th, two globules. [Ordinary lumbago yields often very readily to the internal and external use of *Acon.* H.]

4. **Pains in the small of the back, backache.**—There is scarcely any distress less adapted to clinical instruction than backache. It may arise from simple rush of blood, as in the case of hæmorrhoidal patients, or menstrual irregularities; or it may be occasioned by rheumatic spinal irritation, or it may constitute a symptom of incipient tabes dorsualis, or even of softening of the spinal cord. The various sensations of pain do not furnish any adequate explanations on this point, since the most diversified shades of pain, such as burning, pressure, tearing, stinging etc. may occur in all kinds of backache; in the preparatory stage of diseases of the cord, where lameness and formication of the lower extremities are still absent, I know of no better method of clearing up the diagnosis than by investigating the exciting causes of the disease and the accompanying ailments. Where I had to contend with simple rheumatic irritation without any sign of rush of blood or organic affection of the cord, I have effected a cure in most cases by means of *Rhus t.*, *Caust.*, *Nux v.*, *Carbo veg.*, *Ars.*, *Baryt.*, *Kali carb.* and *Laches.;* in the case of **hæmorrhoidal** individuals by

means of *Nux v.*, *Sulph.*, *Carbo veg.*, *Ars.*, *Bell.*, *Caps.*, *Cham.*, *Nitr. ac.;* in the case of women, where the trouble seemed to proceed from the uterus (prolapsus, determination of blood etc.) by means of *Bell.*, *Sep.*, *Plat.*, *Sulph.*, *Thuja.*

5. **Tabes dorsualis.**—Whether the article in Rueckert entitled "Affections of the Spinal Cord" is intended to mean tabes dorsualis or not, is difficult to decide. Chronic myelitis, and even incipient softening can indeed be considerably relieved, as I know from personal experience, by *Phosph.*, *Kali hydr.*, *Sec.*, *Phosph. ac.*, *Nux mosch.*, *Nux v.*, *Alum.* and *Calc.;* but if tabes dorsualis with fatty degeneration has progressed to complete paralysis, were it only of the lower extremities, it is beyond the reach of our remedies, even *Alum.* Inasmuch as the peculiar sensation of numbness and formication in the soles of the feet is not only a symptom of incipient softening of the cord, but likewise of a far advanced chronic myelitis, *Alum.* most likely corresponds with the latter condition rather than the former. Moreover we must not forget that, as I have already stated in the article **hysteria,** Chap. XIX, there are hysteric states of the organism with purely nervous and transitory paralytic conditions which simulate true organic affections of the spinal cord in the most deceptive manner, not even excepting the formication in the limbs, the numb and pithy feeling in the soles of the feet and the sensation as if the abdomen were encircled with a stiff band. True tabes dorsualis always proceeds very slowly from the cauda equina, commencing with paralysis of the toes and thence ascending upwards, but never invading in a few months or weeks the whole body at once, and in a more advanced stage, possesses the sure diagnostic sign of the emaciation first manifesting itself in the back, more particularly in the lumbar region, and the spinous processes of the vertebræ, as well as the vertebræ of the sacrum and the pelvic bones acquiring a skeleton-like prominence. This symptom never occurs in the same manner either in chronic myelitis or in softening of the cord, nor does it ever manifest itself in hysteric affections of the cord. Be this, however, as it may, in true incipient tabes dorsualis after self-abuse, with formication in the spine, incipient unsteadiness of the lower limbs and a feeling of numbness in the extremities, I have frequently succeeded in arresting the disease by means of *Nux v.*, *Sulph.*, *Calc.* and *Phosph.*, and likewise by means of *Natr. carb.*

and *Phosph. ac.* as intercurrent remedies, and I have seen all the ominous symptoms and even the paralysis of the lower limbs disappear again. If the lower limbs are completely paralyzed, the case is of course much worse; if such a paralysis had been in existence for years, I have likewise succeeded in arresting the further progress of the disease, but I have scarcely ever been able to accomplish more, even by means of *Alum met.*

6. **Softening of the spinal cord.**—In this disease which is not only characterized by the symptoms peculiar to all affections of the spinal cord, but likewise by a contortion of the more or less paralyzed extremities (hands and feet), I have always derived the best, although an inconsiderable effect, from *Calc.* and *Phosph.*

## CHAPTER XXIII.

### PECULIAR PHENOMENA IN THE EXTREMITIES.

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1. **Panaritia.**—What Schelling observes in Hygea, XXI. p. 446, and in Rueckert, Vol. III. page 560 etc. concerning the panaritium diffusum with reference to *Lyc.* and partially also with reference to *Rhus t.*, seems to me to be applicable to a species of pemphigus rather than to panaritia. In Paris both pemphigus and pompholix occur almost epidemically at certain seasons; I have seen pompholix break out on the first phalanx of the left index finger in a case where the vesicle that had started up over night, was still seated on the burning spot. The patient who had to leave immediately, neglected it with a view of showing it to me on his return. On his return, a fortnight after, the hand was in a frightful condition, swollen and dark-red, studded with vesicles full of a red and yellow fluid, between which blisters might be seen of the size of peas, lead-colored and bluish-red. *Lyc.* cured this case as it has done so many other cases of malignant pemphigus; the ulcers leaving a long-lasting red or bluish-red spot. This same thing happened in another case, where a large, gangrenous, blackish-blue blister that spread over the whole hand, developed itself out of the pompholix-vesicle. After these preliminary remarks I am prepared to assert that neither *Lyc.* nor *Rhus* has done the least thing for panaritium in my hands. On the other hand I have very frequently and speedily cured a majority of the panaritia that I have had to treat, with *Silic.*, more particularly if pus had already begun to form or even to escape. If the pus has a bad color, or the bone is affected, *Silic.* is so much more specially indicated and ranks ahead of any other remedy. If the swelling is not yet sufficiently ripe to discharge, or has just begun to show itself, a single dose of *Sulph.* sometimes arrests the whole disease. If, after *Silic.*, the swelling does not show any disposition to break

in a short time, *Hep.* hastens the process of suppuration; if the discharge should be too profuse and last too long, *Silic.* will then again be found indicated. If gangrene threatens to set in, *Laches.* or *Ars.* will have to be given. As for *Bry.*, I have found it just as ineffectual in panaritia as *Lyc.* and *Rhus*; I know nothing of the effects of *Graph.* recommended by Kreussler, nor of those of *Caust.* recommended by Goullon; owing to the rapidity with which *Sulph.*, *Silic.* and *Hep.* have always effected the cure of panaritia in my hands, I have never found it necessary to try other remedies.

2. **Ischius, coxalgia.**—If this affection, which, in the case of adults, is characterized by a pain from the hip to the foot, is of a rheumatic character, *Merc.*, *Puls.* or *Rhus t.* are the best remedies for it; if of a neuralgic nature, following the track of the ischiadic nerve on the outer side of the limb, *Coloc.* relieves this pain without fail in the smallest dose, and need not be given in quantities large enough to act as a purgative, as was advised some time ago by a homœopathic physician. If the hip-joint is inflamed, as happens in the case of children afflicted with spontaneous luxation, *Merc.*, *Rhus t.* or *Calc.* are the most efficient remedies at the commencement of the disease. If the inflammation has reached the stage of ulceration and disorganization of the joint (coxarthrocace), and neither *Merc.* nor *Calc.* meets the case, *Sulph.*, *Phosph.*, *Caust.*, and sometimes *Coloc.* and *Silic.* render excellent service; only these remedies must be allowed to act for several weeks without being disturbed.

3. **Affection of the Knee.**—Among all rheumatic, arthritic or other inflammations of joints I know of none that cause so much trouble to a physician as gonitis. If this inflammation is the result of external injuries, with escape of the synovial fluid, and *Arn.* does not speedily arrest the inflammatory process, the resulting mischief sometimes defies all treatment. In such cases *Sulph.*, *Iod.* and *Silic.* have still afforded the most help. In the gonitis of scrofulous individuals no remedy surpasses in good effect *Merc.*, *Sulph.* and *Calc.*, provided these remedies are allowed a sufficient time to act; even if suppuration or ulcerous destruction (gonarthrocace) has already set in, these remedies may still effect a most remarkable change for the better, although *Phosph.* and *Silic.*

may likewise be necessary to complete the cure. Also for **white swelling of the knee** *Sulph.* is an indispensable remedy, and next to *Silic.* perhaps the most efficient, although recent cases are likewise rapidly cured by *Merc.* or *Puls.* **Rheumatic** gonitis is most easily cured by *Acon.*, *Bry.*, *Merc.* or *Puls.* If an **abscess** forms, it is generally brought to a head very speedily by *Bry.*, or by *Merc.* or *Hep.* if *Bry.* should fail; a protracted suppuration is almost always controlled by *Silic.* or *Laches.* Gonitis consequent upon suppression of gonorrhœa (gonitis gonorrhœica), is worse than any; it may occasion an extraordinary swelling of the knee, with horrid pains, for which *Acon.* and *Bry.* are utterly powerless. *Puls.* is more efficient in such a case, but particularly *Merc.* which has rendered admirable service in my hands provided this remedy had not been used by the patient during his previous treatment. **Dropsy** of the knee-joint is sometimes a very obstinate disease. In one case, which had been treated by homœopathic physicians and where finally large doses of Iodine were used internally and the Iodide of Potassium ointment externally, a single dose of *Sulph.* 30th, two pellets, produce a marvellous effect which astonishes me to this day. In five or six days already the swelling began to decrease and, not wishing to repeat the dose until the improvement should cease, I allowed this one dose to continue to act undisturbedly for four weeks, after which the sick knee was in all respects like the sound one and the patient was able to bring his foot down to the ground and walk. Of course not every case gets along as rapidly as this one; but even to this day, if *Sulph.* does not seem to affect the case, nor *Iodine*, the higher attenuations of which act even more penetratingly than the lower, I generally return with the best effect to *Sulph.* after having likewise tried *Silic.* without much benefit.

## CHAPTER XXIV.

## PAINS IN THE LIMBS, RHEUMATISM, ARTHRITIS.

1. **Neuralgia of the extremities.**—Neuralgic pains may not only affect the hip-joint and ischiadic nerve, but likewise the calves, arms, soles of the feet etc. They are very troublesome affections; the remedies that have been and still are the most efficient for such pains, in my hands at least, are *Ars.*, *Cham.*, *Nux v.*, *Puls.*, *Rhus t.* and above all *Coloc.*, sometimes also *Sulph.* and *Sepia.* In ischias and the neuralgias of the plexus ischiadicus generally, affecting the hip, thighs, calves etc., I give *Puls.*, and, if it does not effect speedy relief, *Coloc.* 30th, two globules, a single dose of which will sometimes cure the attack if of recent origin. In inveterate cases *Coloc.* does not always help at once; in such cases *Calc.* and *Sulph.*, and likewise *Lyc.*, have often proved very useful. *Bell.*, *Fer.*, *Arsen.*, *China* and *Nux v.* have likewise been employed by me in such inveterate cases with success, provided the indications given below in Nos. 4 and 5 pointed to these drugs. For neuralgia of the brachial plexus, affecting the shoulder-joint, upper arms etc., *Bell.* and *Thuja*, and likewise *Calc.*, *Lyc.* and *Verat. alb.* have so far proved the most efficient remedies. In prescribing for these neuralgic pains I am not so much guided by the sensations (see No. 4), as by the circumstances in which (see No. 5), and the accompanying secondary symptoms with which they manifest themselves. Only if the kind of pain is sharply delineated, I have regard to it in the selection of my remedy, not otherwise.

2. **Rheumatism.**—In acute, febrile rheumatism *Acon.* is the first remedy I make use of, and which I prescribe in this as in all other acute inflammations, in form of a watery solution, a tea-

spoonful every two or three hours. If *Acon.* is not sufficient and the swelling is hot and red, I give in most cases *Bry.* with the best result, in the same manner as *Acon.;* or, if the special indications given below, point to them, *Bell.*, *Colch.* or *Rhus t.;* if the swelling is rather **pale** or **rose-colored,** I give *Puls.*, *Nux v.*, *Arn.*, *Cham.*, *China*, or again *Bell.*, *Bry.* If all the joints are invaded, *Puls.* 30th, two globules in water, often acts like a charm; likewise *Nux v.*, if the pale swelling has likewise affected the muscles of the chest and back. In a desperate case of this kind, where the feet, legs, hands and arms, and likewise the chest and back were invaded, the patient was lying in her bed with the most excruciating pains. Being anxious to avoid every kind of homœopathic aggravation, I poured a teaspoonful of a solution of two globules of *Nux* 30th, into another tumbler, and a teaspoonful of this solution into a third tumbler of water, and ordered a teaspoonful of this third solution to be given the patient every three hours until I should see her again next morning. The prescription was made at 10 o'clock at night. When I saw the patient again, the change was extraordinary. Soon after taking the first dose she had dropped to sleep, slept quietly the whole night for the first time in eighteen days, the rheumatic swelling as well as the pains had decreased, and disappeared entirely in three days simply by continuing the solution out of the third tumbler. Many such gentle and quick cures have been achieved by me with very small doses. *Colch.*, *Arsen.*, *Verat. alb.*, *China*, *Merc.* and *Cham.* have been of essential advantage to me in the treatment of inflammatory rheumatism. In **chronic** rheumatism without fever one of the most important remedies, beside those already named, *Bry.*, *Rhus t.*, *Puls.*, *Nux v.*, *Colch.*, *Arn.*, *Arsen.*, *Verat. alb.*, is *Caust.*, and likewise *Sulph.*, *Lyc.*, *Phosph.*, *Thuja.*

3. **Arthritic affections.**—If they set in in an acute form with fever, I proceed in the same manner as for acute rheumatism. Altogether I know of no remedy for inflammatory rheumatism that has not likewise had a good effect in gout; in inveterate chronic gout without fever, the most efficient remedies are *Caust.*, *Calc.*, *Lyc.*, *Sulph.*, *Thuja.* and *Ant. cr.* For arthritic **nodosities** nothing surpasses in efficacy, *Calc.*, *Lyc.* and *Caust.* [also *Ac. benzoic.* H.]; if these nodosities become very painful, red, inflamed, *Acon.* and *Arn.* sometimes afford speedy relief.

4. **Special Indications according to the nature of the pains.**—In neuralgic as well as rheumatic and arthritic pains I have derived the most benefit for **burning** pains from *Ars.*, *Caust.*, *Merc.*, *Bell.*, *Bry.*, *Rhus t.;* for **boring** pains, from *Calc.*, *Merc.*, *Puls.;* for **aching** pains, from *Nux v.*, *Bry.*, *Ars.*, *Arn.*, *Bell.*, *China*, *Calc.;* for **numb** and formicating pains, from *Nux v.*, *Rhus t.*, *China*, *Lyc.*, *Arn.*, *Puls.*, *Sulph.;* for a sensation of **deadness** in the parts, from *Bry.*, *Cham.*, *Nux v.*, *Rhus t.*, *Puls.*, *Lyc.*, *Thuja*, *China*, *Sulph.;* for **throbbing** pains, from *Acon.*, *Bell.*, *Merc.*, *Cham.*, *Fer.*, *Puls.*, *Rhus t.;* for a painful tearing, drawing, stitching **jerking** and **twitching** in the affected parts, from *Puls.*, *Coloc.*, *Rhus t.*, *Bell.*, *China*, *Colch.*, *Calc.*, *Nux v.*, for **cutting** pains, from *Arn.*, *Bell.*, *Coloc.*, *Phosph.*, *Calc.*, *Rhus t.*, *Lyc.;* for **lancing,** stinging pains, from *Acon.*, *Bry.*, *Lyc.*, *Coloc.*, *Merc.*, *Rhus t.*, *Thuja*, *Calc.;* for a pain as if **sprained,** from *Arn.*, *Rhus t.*, *Bry.*, *Calc.*, *Caust.*, *Puls.*, *Sulph.;* for **tensive** pains, from *Bry.*, *Rhus t.*, *Lyc.*, *Caust.*, *Phosph.*, *Sulph.;* for **wandering,** shifting pains, from *Puls.*, *Rhus t.*, *Bry.*, *Colch.*, *Sulph.*, *Arn.*, *China;* for a sensation as if **bruised** or contused, from *Arn.*, *Verat. alb.*, *China*, *Acon.*, *Bry.*, *Calc.*, *Rhus t.*, *Nux v.;* for **contracting** pains, from *Bell.*, *China*, *Nux vom.*, *Calc.*, *Rhus t.*, *Puls.*, *Sulph.*

5. **Indications according to the aggravating circumstances.**—In my experience the principal remedies are, if the pains are excited or aggravated by **damp** and **cold** weather, *Rhus t.*, *Verat. alb.*, *Colch.;* after getting **wet,** *Rhus t.*, *Puls.*, *Dulc.*, *Sulph.;* at every **change of weather,** especially, *Arsen.*, *Calc.*, *Rhus t.*, *Sulph.*, *Carbo veg.*, *Dulc.*, *Laches.*, *Merc.*, *Verat. alb.*, *Puls.;* if aggravated in the **open air,** *Nux v.*, *Bry.*, *Calc.*, *Rhus t.*, *Caust.*, *Sulph.*, *Verat. alb.;* if aggravated by the least **cold,** *Dulc.*, *Phosph.*, *Rhus t.*, *Puls.*, *Cham.*, *Merc.*, *Nux v.*, *Sulph.;* if aggravated by **warmth,** *Bry.*, *Phosph.*, *Puls.*, *Thuja;* by the warmth of the **bed** particularly, *Merc.*, *Ars.*, *Cham.*, *Bell.*, *Rhus t.*, *Sulph.*, *Carbo veg.;* if aggravated by **moving** the affected part, *Bry.*, *Puls.*, *Ars.*, *Thuja;* if by motion **generally,** *Bry.*, *Arn.*, *Colch.*, *Bell.*, *Ars.*, *Cham.*, *Sulph.*, *Carbo veg.*, *Nux v.;* if aggravated by **rest,** *Rhus t.*, *Puls.*, *Dulc.*, *Fer.*, *Sulph.*, *Ars.;* if by a **recumbent** posture, *Arsen.*, *Bell.*, *Cham.*, *China*, *Fer.*, *Rhus t.*, *Puls.;* if by **sitting,** *Puls.*, *Fer.*, *Ars.;* if every couch feels as if **too hard,** *Arn.;* if **contact** cannot be borne, *China*, *Bry.*, *Acon.*, *Bell.*, *Cham.*, *Sulph.*, *Lyc.*, *Coloc.*, *Colch.*,

*Puls.;* if the attacks are especially worse **in the evening**, *Puls., Bell., Rhus t., Colch., Coloc.;* if especially **at night**, *Merc., Arsen., Cham., Rhus t., Fer., China, Bry., Calc., Lyc., Colch., Dulc., Puls., Thuja;* if **after** midnight, *Thuja, Merc., Arsen., Sulph.;* towards two or three o'clock in the morning, *Ars., Thuja.*

6. **Indications according to the ameliorating circumstances.**—If improved by **warmth**, *Ars., Rhus t., Caust., Coloc., Lyc., Merc., Sulph.;* if by **cold**, *Puls., Thuja;* if by the **warmth of the bed**, *Dulc., Rhus t., Thuja, Calc., Verat. alb.;* if **perspiration** hushes the pains, *Ars., Rhus t., China, Thuja;* if improved by **motion**, *Rhus t., Dulc., Thuja, Coloc., Fer., Arn., Merc., Puls., Sulph., Calc.;* if improved by **rest**, *Bry., Colch., Nux vom., Phosph.;* if by **pressing upon** the part, *Bell., Puls., Rhus t.*

7. **According to the affected parts.**—In **articular rheumatism** the following remedies are always useful: *Acon., Puls., Merc., Colch., Bry., Bell., Arsen., China, Sulph.* [in rheumatism of the smaller joints, *Caulophyll.* H.]; if the large muscles of the **trunk**, chest and back are principally invaded, above all, *Nux vom.*, also, *Arn., Merc., Rhus t., Ars.;* in rheumatic pain in the **nape of the neck**, above all, *Bell.*, also *Bry., Kali carb., Lyc., Merc., Ars., Caust., Puls.;* in **pains of the shoulder**, above all, *Bell.*, or *Rhus t.*, also frequently, *Calc., Caust., Lyc., Thuja, Merc., Puls., Bry.;* if the hands and fingers are principally affected (chiragra), *Calc., Caust., Lyc., Ars., Bry.;* if the hip and the **hip-joint** are principally affected (coxalgia, coxagra), *Coloc., Merc., Rhus t., Calc., Ars., Bell.*, also *Lyc., Sulph., Bell., Carbo veg., Nux v., Puls.;* if the **knee** is principally invaded (gonagra), *Caust., Lyc., China, Bry., Calc., Sulph., Rhus t., Caust.;* if the **tarsal joint** and the **toes** are principally affected (podagra), *China, Acon., Lyc., Caust., Nux v., Bry., Sulph., Calc.*

8. **According to the condition of the parts.**—If **inflamed** and **swollen**, *Acon., Bry., Puls., Bell., Arn., Hep., Laches., Ant. cr.;* if **red** and the swelling **shines**, *Acon., Bell., Bry., Rhus t., Arn., Colch., Ars.;* if the swelling is **pale, pale-red** or rose-colored, *Bry., Nux vom., Merc., Puls., Arn., Bell.;* for arthritic **nodosities**, *Calc., Lyc., Caust.* [also *Ac. benzoic.* H.]

9. **According to metastatic changes.**—If rheumatism or gout threatens to throw itself upon the heart, our most reliable remedies are, *Acon.*, *Bry.*, *Laches.*, *Phosph.*, *Ars.*, also *Colch.*, *Rhus t.* or *Aurum.;* [also *Cactus grandiflorus.* H.]; if the disease tends to the **head,** *Sep.*, *Spig.*, *Bry.*, *Nux v.;* if to the **chest,** *Bry.*, *Acon.*, *Phosph.*, *Merc.*, *Sulph.;* to the **stomach** or **bowels,** *Ant. cr.*, *Bell.*, *Sulph.*, *Coloc.*, *Puls.*, *Nux v.* On this occasion I cannot with sufficient emphasis dissuade my colleagues from the use of external applications in rheumatic and arthritic affections. I have seen the worst metatases occur in the case of individuals who were in the habit of using externally opodeldoc or even the tincture of Arnica without the advice of their physician. Twice I have treated an old man afflicted with gout, whom external applications of this kind had brought to the brink of the grave, developing the first time pneumonia and the second time enteritis; these affections did not yield to treatment until the gout had reappeared. I have seen violent **ophthalmia,** for which *Acon.*, *Ant. cr.*, *Bell.* or *Coloc.* proved the most efficient remedies; and likewise **affections of the bladder,** for which *Acon.*, *Puls.*, *Coloc.*, *Lyc.*, and *Nux v.* were most successfully administered, follow such suppressions by external means; in one case even a sort of **Volvulus** which yielded to *Thuja.*

## CHAPTER XXV.

## GENERAL SPASMS AND PARALYTIC CONDITIONS.

### 1. Spasms of the Extremities.

1. **Chorea, St. Vitus' dance.**—If certain self-constituted critics, who formerly were in the habit of venting their abuse in the Hygea, still protest to this day against the use of *Caust.* in Chorea, asserting that this agent is absolutely powerless in this disease; they simply show by this conduct that they have never yet had a case of chorea to treat, or else that, if they did try *Caust.*, they gave it, as is their wont, in such massive doses that they only caused aggravations without effecting a cure. It is true, so far I have employed *Caust.* only in the so-called chorea minor, with contortions of the limbs without any derangement of the mental faculties, but always with the best and speediest results, more particularly if the attacks had been occasioned by a sudden emotion like fright, fear etc., or by the suppression of some exanthem, and *Ignat.* had proved powerless for such a condition. If the critics should object to this, that chorea very often gets well of itself, which is undoubtedly correct, and that every pretended cure of chorea by means of *Caust.*, is really a spontaneous cure due to the restorative action of nature, all I can say in reply is that it is at all events remarkable that such an accidental natural cure should always take place a short time after the administration of *Caust.*, and I do not understand why similar natural cures of chorea do not take place after the exhibition of this agent at the hands of my critics. For that matter, in all cases of chorea minor, if the disease had been caused by a sudden fright, I commence the treatment with *Ignat.*, giving *Caust.* if *Ignat.* does not prove sufficient. If chorea major results from fright at the start, I resort to *Cupr.* or *Stram.*, giving *Cupr.* more particularly, if the patient indulges in ludicrous gestures, and tries to hide himself or crawl away; *Stram.*, if the patients are haunted by frightful phantasms. If all these remedies remain ineffectual, I usually resort to *Sulph.* and

*Calc.*, and have by this means achieved many fine cures. Recent cases have often speedily and radically yielded in my practice to *Bell.*, in the case of girls, and to *Nux vom.* in the case of boys; *Crocus* has cured chorea, if the patient was troubled with a disposition to **laugh**, and *Cina* if the chorea was accompanied by decided worm-symptoms. Regarding the curative virtues of *Agar.*, *Hyosc.*, *Cocc.*, *Sec.*, *Sep.* and *Natr. mur.* which have likewise been recommended for this disease, I have no experience of my own to offer; in a case of chorea minor, *Lyc.* effected a speedy and permanent cure; the patient was a boy of 12 years who had frequently passed pieces of tænia.

2. **Eclampsia.**—If these spasms attack pregnant, parturient or lying-in women, I first give *Bell.* unless some other remedy should be specially indicated, or, if the spasms are attended with profuse loss of blood, *Plat.;* or *Hyosc.* if the attacks are followed by apathetic stupor. If the spasms occur during labor, and the pains are not sufficient, *Sec.* sometimes renders excellent service; likewise *Cham.* if the spasms are accompanied by distressing urging to stool; *Ipec.*, if the patient complains of severe cutting pains round the umbilicus; and sometimes even *Ign.*, especially if **fright** had helped to bring on the attack. In eclampsia of children I have frequently succeeded in arresting the attack by rubbing my finger moistened with the tincture of *Camph.* under their noses; as a rule, however, if no special indications were present, *Ign.* has generally been of eminent service to me; likewise *Cham.* if the children moan a good deal, or *Ipec.* if they vomit often and a great deal. If there is a good deal of rush of blood to the head, *Bell.* is sometimes indicated, and at other times *Opium*, more particularly if the patient is completely stupefied and unconscious and this condition is not very speedily relieved by *Hyosc.* In most cases, of children as well as pregnant females, olfaction is sufficient, which has the advantage, in case a remedy should not soon help, of allowing another to be chosen without loss of time. If the remedy is perfectly homœopathic, an improvement is soon effected by it, the next paroxysm already being much milder. [*Gelsem.* is an excellent remedy for eclampsia, likewise *Verat. vir.* and palliative doses of *Op.* H.]

3. **Hysterical Spasms.**—One of the most effective remedies

for these spasms, which sometimes not only simulate eclampsia but likewise epilepsy, is *Ignat.;* during the attack the patient is often speedily relieved by rubbing *spirits of Camphor* under her nose. It is very likely that more than one case of pretended cure of epilepsy of women was nothing more than hysteric convulsions. I remember the case of a woman that was represented to me as a case of epilepsy not only by the patient's own family, but likewise by written consultations with several old-school physicians. I had never seen this patient. *Ignat.* kept her free from her paroxysms for a whole year. The paroxysms returning I desired to see her. Being wealthy, she came to Paris for six months, so that I had a chance to observe her. I noticed that her paroxysms set in with symptoms that never occur previous to an attack of epilepsy, namely yawning, stretching, eructations, distension of the abdomen, vomiting and even the sensation of an ascending ball, and that the paroxysm itself was unaccompanied either by froth at the mouth, rattling breathing, biting the tongue or contorting the mouth. I gave her *Silic.*, which is my great remedy for hysteric spasms. if *Ign.* is not sufficient, after which the spasms again intermitted for six months; she was finally completely restored by several remedies, among which *Hyosc.*, *Bell.*, *Cupr.* and *Caust.* contributed most towards her cure. Beside these remedies I have given *Cocc.*, *Cham.* and *Secale* for these spasms with great success.

4. **Epilepsy.**—Among the epilepsies related in Rueckert in connection with *Bell.*, *Hyosc.* etc. several were probably nothing else than hysteric spasms, although I have seen good effects even in the case of men from *Bell.* as well as from *Hyosc.;* from the latter even in a case which had been caused by fright and *Ign.* remained ineffectual. As a general rule, if no special indications point to other medicines, I commence my treatment with *Ignat.*, whether the disease originated in fright or not; if this has no effect, I then administer in succession *Sulph.*, *Calc.*, *Lyc.*, *Caust.* and *Cupr.;* by this means I have effected many a cure with *Calc.* and *Sulph.*, likewise with *Caust.* and *Cupr.* *Laches.* and *Silic.*, and more especially *Lyc.* have often rendered me excellent service and, in the case of plethoric individuals who were at the same time troubled with congestions about the head, *Bell.*, *Sulph.* and *Calc.* As a rule it is very difficult to hit at once upon the right remedy in epilepsy, for the reason that epileptic attacks resemble each

other so closely. Rueckert's indications, compiled from several authors, are unfortunately nothing more than vague theoretical phrases not borne out by practice, and are not only applicable to the remedies there mentioned, but likewise to a variety of other remedies, for instance under the heading "scrofulous individuals," where *Bell.*, *Sulph.*, *Lyc.*, *Silic.*, *Laches.* etc. might just as well be added to *Calc.* which is the only remedy mentioned in connection with this heading. Being anxious to furnish positive indications corroborated by my own practice, I have no wish to add to such general theoretical views a multitude of other equally vague hypothetical speculations of my own, and therefore confine myself to the general statement that the series of remedies which I have pointed out, namely: *Ignat.* (or *Bell.*), *Sulph.*, *Calc.*, *Lyc.* or, *Sulph.*, *Caust.*, *Silic.* or *Cupr.*, leads us, in the absence of more definite special indications, most speedily to the desired end. If the attacks depend beyond doubt upon suppressed exanthems or ulcers, *Ars.* and *Caust.* and sometimes *Cupr.* act to the best advantage; *Ignat.*, *Hyosc.*, *Caust.*, where the paroxysms originated in fright; *Caust.*, if the attack ceases after the patient drinks water, and *Calc.* if the attack returns after a similar act. If the paroxysms set in principally at night, *Calc.*, *Caust.* and *Silic.* are the best remedies; and if they break out in the morning, *Calc.* and *Lyc.* Regarding epileptic spasms setting in at the time of the menses, we have to be guarded and not perhaps mistake an hysteric spasm for an epileptic convulsion. Beside the diagnostic signs mentioned in No. 4, we may likewise observe that in hysteric spasms the thumbs are never clenched; the eyes, although sometimes staring, are always bright and the pupils remain moveable, the patients moan, talk even and call the family, and the subsequent sleep is refreshing and the consciousness returns fully restored, all of which is more or less different in a case of true epilepsy.

5. **Catalepsy, trance.**—This condition of the nervous system which most commonly attacks hysteric females, but likewise men in the prime of life and even children, and a diagnostic sign of which is that the limbs can be bent like wax, yields most speedily to *Bell.* or *Verat. alb.*, although I have had cases where *Acon.*, *Phosph.*, *Cham.*, *Hyosc.* and *Stram.* had a speedy and very good effect; *Phosph.* and *Acon.* more particularly in the case of young girls who were possessed of a marked predisposition to somnambulism.

6. **Tetanic spasms, lockjaw.**—If the spasm affects the whole body, the chief remedies are *Camph.*, *Cic.*, *Bell.*, *Ignat.*, *Caust.* and *Nux v.* In traumatic tetanus, if *Arn.* does no good, *Ignat.* often effects a cure, likewise *Bell.*, *Merc.*, *Acon.* In **trismus**, *Lyc.* is a good remedy beside those mentioned above.

7. **Cramps of the fingers.**—The main remedy is *Silic.; See.* and *Stann.* have likewise proved very efficient in my hands.

8. **Cramps in the calves.**—A few cases of nocturnal cramps in the calves yielded very speedily to *Cham.*, others to *Cupr.*, *Verat. alb.*, *Coloc.* and *Sulph.* [also *Acon.* H.]

9. **Special indications** for the selection of remedies according to the **causes** which excite the spasms.—If excited by a fit of **chagrin**, the following remedies have proved most serviceable in my hands, *Ignat.*, *Bell.*, *Cocc.*, *Acon.;* if by a fit of **fright** or fear, *Ignat.*, *Caust.*, *Cupr.*, *Hyosc.*, *Plat.*, *Cham.*, *Opium*, *Sulph.*, *Sec.;* if brought on by every **emotion**, *Acon.*, *Bell.*, *Coff.*, *Hyosc.*, *Ignat.*, *Nux v.*, *Puls.;* if they set in principally in the **evening**, *Calc.*, *Stram.*, *Sulph.*, *Caust.;* if particularly early in the **morning**, *Nux v.*, *Calc.*, *Plat.;* especially **at night**, *Cupr.*, *Silic.*, *Sulph.*, *Calc.*, *Caust.*, *Cic.*, *Hyosc.*, *Opium*, *Sec.* At **new moon**, *Silic.*, *Sulph.*, *Caust.;* at **full moon**, *Calc.;* if excited by the least **contact**, *Bell.*, *Cocc.*, *Stram.;* if by **drinking water**, *Calc.*, *Rhus t.;* if drinking water **arrests** the spasm, *Caust.;* if brought on by **washing**, *Sulph.;* if they break out during **sleep**, *Silic.*, *Kali carb.*

10. According to the **accompanying symptoms.**—If the spasms are accompanied by great **anxiety**, *Cupr.*, *Bell.*, *Verat. alb.;* if by **colic**, particularly, *Cham.*, *Merc.*, *Sulph.*, *Ipec.;* by **loss of consciousness**, stupor, *Hyosc.*, *Bell.*, *Stram.*, *Opium;* **vomiting**, nausea, *Ipec.*, *Cupr.*, *Nux v.;* **pale** face, *Ipecac.*, *Calc.*, *Silic.*, *Verat. alb.*, *Ars.*, *Cic.*, *Sulph.;* **flushed** face, *Nux v.*, *Bell.*, *Stram.*, *Acon.*, *Cupr.;* involuntary **emission of urine**, *Caust.*, *Cupr.*, *Laches.*, *Hyosc.;* **cough**, or after the spasm, *Cupr.*, *Cina*, *Cham.*, *Verat. alb.;* **palpitation** of the heart, especially, *Ars.*, *Acon.*, *Sulph.*, *Glonoin;* **headache** before or after the spasms, *Bell.*, *Caust.*, *Calc.*, *Cham.;* **formication** in the extremities, *Bell.*, *Ignat.*, *Sec.*, *Caust.;* crawling in the limbs, *Sil.*, *Bell.*, *Sulph.;* **laughter**, spasmodic, *Crocus*, *Cupr.*, *Ignat.*, *Caust.*,

*Bell.;* **paralysis** after the spasm, *Caust., Laches., Cocc., Rhus t.;* **froth** at the mouth, *Calc., Caust., Silic., Bell., Cupr., Ignat., Laches., Hyosc.;* **syncope** after the spasm, *Ignat., Cham., Acon., Cupr., Carbo veg., Verat. alb.;* **backache** before or after the spasm, *Calc., Lyc., Mosch., Merc.;* **sopor,** *Opium, Hyosc., Bell., Camph., Cham., Laches.;* **perspiration** after the spasm, *Silic., Bell., Sec.;* **vertigo** before or after, *Nux v., Bell., Laches., Calc., Silic., Opium, Ars.;* **numbness** of the extremities after the spasm, *Nux v., Bell., Opium, Sec., Sulph., Rhus t.;* with **mental alienation,** *Cupr., Stram., Bell., Croc., Hyosc.;* with **weeping,** in the case of hysteric females, *Ignat., Mosch., Cupr., Bell., Caust.;* with **rage,** *Stram., Hyosc., Bell., Croc.*

11. According to the parts more **particularly affected.**—Spasms of the **head,** particularly, *Lyc., Caust., Cupr., Bell., Camph., Cic.;* of the **facial muscles,** *Bell., Cham., Graph., Opium, Sec., Stram.;* spasmodic motion of the **arms,** particularly, *Cupr., Cocc., Silic. Merc., Stram.;* of the **hands** and fingers particularly, *Cupr., Cham., Ign., Sec.;* of the **lower limbs,** particularly, *Cupr., Ignat., Ipec., Sec., Hyosc.;* of the **feet** and toes, *Caust., Cupr., Lyc., Merc., Silic., Sec.*

## 2. Paralytic Conditions.

1. Semi-paralysis of **the circulation,** syncope, apparent death.—As a rule syncope is very often relieved by causing the patient to smell of *Ipec.*, especially if the cause is unknown. If these attacks occur in the case of **hysteric** women, the best remedies are *Ign., Cham., Cocc., Mosch., Acon.* or *Coff.* If they are occasioned by the **heat** of the summer, or by hot rooms, in a crowd, *Carbo veg.* often relieves them, if *Ipec.* and *Ant. cr.* fail. If **vertigo** has preceded, *Nux v., Bell., Acon.*, and sometimes *Arsen.;* if accompanied by **nausea,** *Ipec.*, and often *Cham., Cocc., Verat. alb.* For syncope caused by a sudden **shock** of the feelings, such as fright, etc. *Opium, Coff., Acon., Ign., Cham.;* after debilitating losses, bleeding etc. *China, Carbo veg., Verat. alb.;* after violent paroxysms of **pain,** *Cham., Acon., Verat. alb.;* after excessive **mental exertions,** not only *Nux vom.*, but also *Bell.* and *Calc.* As regards **apparent** death or asphyxia, I have no experience of my own to offer, unless we include long-lasting hysteric syncope, the remedies for which have already been mentioned. I may, how-

ever, mention a case of **asphyxia** by carbonic acid gas. The patient, a child of thirteen years, had been playing in a room without windows near a pan of lighted charcoal, and, on my arrival, was in a state of complete torpor. By washing the child with diluted vinegar, signs of animation, respiratory movements, perceptible pulsations returned, after which I administered *Opium* 6th by olfaction every five minutes for the remaining lethargic condition, which disappeared in 15 minutes; the convulsions, which now set in, speedily yielded to *Bell.*

2. **Complete paralysis** of one or more of the extremities.—In general as well as partial paralysis one of the most important remedies is *Caust.*, no matter whether the right or left side, the upper or lower extremities are affected. I am aware that *Caust.* is not sufficient to cure paralysis, but so far I have never yet treated a case of long standing where *Caust.* did not materially contribute towards a cure. Even in incipient tabes dorsualis, *Caust.*, next to *Sulph.* and *Calc.* often accomplishes everything that can be expected in this disease. Beside *Caust.* I have used with success, in the case of **brandy-drinkers**, *Nux v.*, *Ars.*, *Sulph.;* after **suppressed eruptions** and ulcers, *Caust.*, *Ars.*, *Sulph.*, *Laches.*, *Lyc.;* after excessive **bodily exertions**, *Rhus t.*, *Arsen.*, *Caust.;* after **poisoning by lead**, *Alum.*, *Caust.;* after **getting wet**, *Rhus t.*, *Sulph.*, *Calc.*, *Caust.;* after **spasms**, *Caust.*, *Cupr.*, *Sec.*, *Arsen.*, *Sulph.*, *Bell.*, *Nux v.;* after **rheumatism**, *Caust.*, *Fer.*, *China*, *Arn.*, *Baryt.*, *Rhus t.*, *Ruta;* after **apoplexy**, *Bell.*, *Cocc.*, *Nux v.*, *Caust.*, *Arn.;* after **debilitating** causes (losses of blood, seminal fluid etc.), *Caust.*, *Sulph.*, *Fer.*, *Cocc.*, *Nux v.*, *China;* for **semi-lateral** paralysis, right or left side indiscriminately, *Caust.*, *Cocc.*, *Rhus t.*, *Nux v.*, *Graph.;* for paralysis of the **lower extremities**, especially, *Caust.*, *Cocc.*, *Nux v.*, *Sulph.*, *Calc.*, *Phosph.*, *Rhus t.*, *Sec.;* of the feet, particularly, *Ars.*, *Phosph.*, *Oleand.;* of the **arms**, *Caust.*, *Calc.*, *Cocc.*, *Nux v.*, *Rhus t.*, *Fer.*, *Sep.*, *China;* of the **hands** in particular, *Caust.*, *Ars.*, *Sulph.*, *Silic.*, *Rhus t.*, *Sec.;* of the **facial muscles**, *Caust.*, *Cupr.*, *Graph.*, *Opium*, *Nux v.*, *Bell.;* of the **tongue** and organs of speech, *Caust.*, *Bell.*, *Graph.*, *Dulc.*, *Arsen.*, *Laches.*, *Hyosc.;* of the **muscles of deglutition**, *Caust.*, *Cupr.*, *Silic.*, *Ars.*, *Bell.*, *Laches.;* of the **rectum**, *Hyosc.;* of the urinary **bladder**, *Ars.*, *Dulc.* [In acute attacks of paralysis, with numbness, formication, swollen feeling etc., *Acon.* should never be forgotten. H.]

## CHAPTER XXVI.

## GENERAL DYSCRASIAS, SCROFULOSIS, GLANDULAR AFFECTIONS, DISEASES OF THE BONES AND DROPSIES

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1. **Scrofulosis.**—It is generally admitted that the manifest symptoms of this disease, glandular swellings, scurfy herpes, eruptions, arthrocace, osseous affections of every description, mesenteric atrophy only show themselves among children and young people to the age of pubescence; but it would be asserting too much to confine the scrofulous disease within this period of time unless it is eradicated by adequate treatment. In my opinion scrofulosis at a later period is replaced by **tubercles** and by **gray granulations** (miliary tubercles) in the lungs, brain, liver, bowels and other organs, or, in the course of years, by chronic herpes, exanthems, polypi, cataract, staphyloma, and other analogous phenomena which, in their complex, furnish a striking parallel to what Hahnemann has grouped together under the name of **psora** in his Chronic Diseases. In anamnestic respects nothing is more important than to ask the patient who wants to be treated for some chronic disorder, whether he had had the itch once in his life-time; and whether in his childhood he had had scald head or swollen glands, and how these affections had been treated. If at that time these diseases had not been treated systematically with the remedies specifically adapted to them, it will not be an easy task to improve the subsequent manifestations of the scrofulous disease unless the specific remedies are brought to bear upon them whenever these remedies are indicated; in so far as *Sulph.* is undoubtedly the chief remedy for scrofulosis, the empirical method of such homœopaths as commence the treatment of every chronic disease with *Sulph.*, can be justified as rational. Beside *Sulph.* it is more particularly, *Calc.*, *Lyc.*, *Silic.*, *Phosph.*, and in a more limited degree, *Ars.*, *Bell.*, *Nux vom.*, *Baryt.*, *Alum.*, *Caust.*, *Dulc.*, that correspond specifically with scrofulosis and show themselves most efficacious against its various manifestations and products,

especially in childhood. More than one child, with an hereditary scrofulous taint, has been freed by me by means of *Sulph.* and *Calc.* of pretty nearly all the symptoms of scrofulosis; in other cases I have moreover had to depend upon *Silic.* and *Lyc.* However, if we desire to obtain permanent results, the **method** of employing the truly suitable remedies in such cases, is just as important as the selection of these remedies themselves. Giving *Sulph.* one day, and in three or four days another remedy, then again *Sulph.* to be again succeeded in a few days by some other remedy, leads to no good result for the reason that not only *Sulph.* but every other antipsoric remedy, such as *Calc.*, *Lyc.*, *Silic.*, *Caust.* etc. each for itself, must be allowed to act at least several weeks, without its action being disturbed by any other intervening medicine. Scrofulosis being a chronic and slowly-progressing disease, there cannot be any objection to allowing an anti-scrofulous medicine to act for a long time since by this means, (if all accidental disturbances of the children's health, such as violent colds, epidemic influences, derangements of the stomach, mechanical injuries etc. can be warded off,) all other **voluntary** manifestations of the scrofulous disease are prevented rather than promoted and, if any should take place, are very generally wiped out by the power of the progressively-acting drug. By way of example I will state a case that will illustrate the meaning of what I intend to convey. The two months old infant of a man who was perfectly familiar with Homœopathy, had chronic summer-complaint, for which all imaginable remedies administered by the father, such as *Cham.*, *Rheum*, *Dulc.*, *Bry.*, *Ant. cr.*, *Ars.*, *Sec.*, even *Calc.* etc. had been given without any effect. Being consulted I gave the child *Sulph.* 30th, two pellets, after which the watery stools improved the very same day, and on the fifth day began to grow firmer, and the child who was reduced to a skeleton, again began to pick up in flesh. On the eighth day after the *Sulph.* had been administered, another papescent stool took place, for which the father, without waiting to see whether this was a merely transitory or permanent change, gave *Rheum* for the reason that the stool had a somewhat **sour** smell, and, since *Rheum* had no effect, again exhibited all imaginable remedies for about eight days until the child was again reduced to skin and bones and the father sent for me a second time. I again prescribed a dose of *Sulph.* 30th, two globules, with the same result. First, there was a gradual decrease of the watery

stools, they became papescent, firmer, and on the fifth day after the *Sulph.* had been prescribed, even a sort of constipation set in which lasted about two days, after which papescent, sour-smelling stools again set in. Having requested the father not to interfere I gave *Sacharum lactis* in order to see what the upshot would be and whether these sour-smelling stools were the effect of *Sulph.*, among the pathogenetic symptoms of which abnormal evacuations of this character occur. These stools disappeared again in two days, they grew more normal and under the continued action of *Sulph.* the child, who was brought up by hand, gained from day to day in flesh and strength so that nobody cared to again interrupt this splendid effect by the exhibition of another remedy. In this manner, if we will but be satisfied to watch for a few days phenomena that may occur incidentally, before we determine upon a change in our prescription, we shall be able to radically cure, even at the tenderest age, by means of *Sulph.*, *Calc.*, *Silic.* and *Lyc.* administered at adequate intervals, not only hydrocephalic heads, the tardy closure of the fontanelles, curvatures of bones, muscular debility which makes it difficult for children to learn to walk, but likewise mesenteric atrophy and other symptoms of scrofulosis, and by this means to spare the little ones subsequent swellings of glands, osseous affections and scurfy eruptions, scald head etc. If these symptoms occur in the case of children, I invariably commence my treatment with a dose of *Sulph.*, which I allow to act for five weeks, after which I give *Calc.* for eight or ten weeks unless prevented by other indications. If osseous affections are present which *Calc.* had not removed, I then give *Silic.* or *Lyc.* provided even at this tender age a disposition to glandular swellings or humid, scurfy eruptions which *Calc.* had likewise left uncured, shows itself. If, in a case of mesenteric atrophy, after the action of *Calc.* had become exhausted, a perceptible swelling of the mesenteric glands still remains, I resort to *Ars.* or *Lyc.* I give a single dose of the thirtieth attenuation dry; those who have no faith in such a small dose, may give three such doses in the first week; if the curative action has once set in, in ten days or a fortnight, new doses are very apt to disturb the action of the former. Those who have faith, can soon convince themselves that a single dose acts better than several doses in succession, and even more speedily and without producing unpleasant medicinal symptoms. If the above-mentioned remedies do not help, it is at all

events better to resort to new remedies than to more massive doses of the former drugs. In this event, *Baryt.* and *Hep.*, after *Ars.*, but not immediately after *Calc.*, have acted with excellent effect in mesenteric atrophy. In affections that develop themselves at a later period, such as **glandular swellings,** not only *Sulph.*, *Calc.*, *Lyc.* and *Silic.*, but likewise *Ars.*, *Aurum*, *Baryt.*, *Dulc.*, *Hep.*, *Carbo veg.*, have a good effect; in **ophthalmia** not only *Sulph.*, *Calc.*, *Lyc.* and *Silic.*, but likewise *Hep.* and *Ars.;* in **otorrhœa,** beside the above-named remedies, also *Baryt.*, *Bell.*, *Graph.*, *Hepar;* for **swellings** of the **nose** and **lips,** beside other remedies, *Aur.* and *Bell.;* for **hypertrophy** of the **liver** and **spleen,** *Ars.;* for frequent and chronic **diarrhœa,** *Phosph.* and *Ars.;* for **softening** of the **stomach,** especially *Kreas.* and *Baryt.;* for **tardiness in learning to walk,** beside *Sulph.*, *Calc.* and *Silic.*, also *Natr. carb.;* for chronic **cough,** beside *Sulph.*, *Calc.* and *Lyc.*, likewise *Ars.*, *Hep.*, *Bell.* and *Phosph.;* for difficult **dentition,** beside *Sulph.* and *Calc.*, likewise *Arsen.;* for great **emaciation,** beside *Sulph.* and *Calc.*, likewise *Ars.* and *Baryt. carb.;* for **rhachitis,** beside *Sulph.*, *Calc.*, *Silic.* and *Lyc.*, likewise *Aur.*, *Fluor. ac.* and *Phosph.* As regards *Oleum jec. Aselli*, I have never made use of it for the reason that it has never seemed to me capable of accomplishing that which the chief anti-scrofulous medicines have accomplished in my hands; nor can I protest with too much emphasis against the excessive use of *Merc.* in scrofulous glandular affections. It can only be regarded as a palliative, which may be resorted to every now and then as an intercurrent remedy, but can never be expected to act radically upon the scrofulous disease in all its ramifications, on the contrary, must be expected to aggravate it by injudicious use, and to render it even more inveterate. (See also, Scrofulous ophthalmia, otorrhœa, affections of the nose and lips, eruptions etc., in the respective chapters, and likewise below in Nos. 3 to 5. **Glandular affections** and **Diseases of bones.**)

2. **Tuberculosis.**—According to my observations and experience this disease, whether consisting of fine, **gray granulations** (miliary tubercles) or of **yellowish** tubercles, is in reality another form of scrofulosis (metaschematismus); I never lose sight of this circumstance, wherever I have reason to suspect the existence of tubercles. It may be observed that, where there is no scrofulous taint, no tubercles are ever excited in the lungs or in any other organ by menstrual or puerperal disturbances, a cold drink,

acute exanthemata etc. (measles, scarlatina etc.), but may be superinduced by the suppression of chronic eruptions and tetter. The trouble is that these tubercles may exist in almost any organ of the body, in the brain, spinal cord and liver as well as in the lungs, and that their diagnosis always remains exceedingly uncertain and obscure, unless Trinks and his adherents among the homœopaths, who are in the habit of accusing their colleagues of ignorance in pathology, possess a newly-discovered means of likewise saving in this point their reputation as infallible diagnosticians. Whenever patients complain to me of chronic periodical headache at a circumscribed spot where a dull pressure is experienced, which is now and then accompanied by paroxysms of vertigo, these symptoms always fill me with distrust and cause me to act very guardedly. The same remark applies to the painful pressure at a circumscribed spot in the vertebral column, from which very violent, burning and lancing pains sometimes emanate, with occasional twitchings in more remote localities; likewise to a variety of gastric and digestive complaints when accompanying a seated pain in the region of the liver with periodical lancinating pains flashing from below upwards. In all such cases I commence the treatment as in scrofulosis (see above No. 1), in the absence of other special indications, with *Sulph.*, which I allow to act for four or five weeks, after which I give *Calc.* which I allow to act for eight or ten weeks, after which, if the brain is principally affected, I give *Phosph.*, if the spinal cord, *Caust.*, *Baryt.* or *Phosph.;* and if the liver, especially *Lyc.* or *Silic.;* even if my diagnosis was incorrect, it is a fact that on more than one occasion I have succeeded in removing these dangerous symptoms by *Calc.* alone. The same statement applies very fully to pulmonary tubercles for which, if their existence is plainly evident, I give *Calc.* and afterwards *Phosph.;* and if this should not be sufficient, first *Hep.* and then *Spong.* This method is of course to be pursued only in the first stage of the tubercular disease which, in its subsequent developments, may require very different remedies which the reader will find pointed out in the chapters and articles entitled, cerebral diseases, affections of the liver, softening of the spinal cord, pulmonary phthisis. In some cases *Baryt. carb.*, *Laches.* and *Alum.* have rendered me essential service, and likewise, especially in affections of the liver, *Magnes. carb.* and *Lyc.*

3. **Glandular Affections.**—Although in the majority of

cases these affections are of a scrofulous nature, yet they may likewise arise from other causes and may require a more immediate, somewhat palliative treatment, on which account it may be well to devote a few remarks to this subject. If scrofulous persons are afflicted with simple glandular swellings on the neck, in the inguinal region or in the axillæ, they disappear in most cases under the methodical management with *Sulph.*, *Calc.*, *Lyc.* and *Silic.* indicated in No. 1; if these remedies fail, we shall very often find *Dulc.*, *Hep.*, *Bell.* and even *Merc.* effective; *Merc.* very often serves as an excellent palliative and intercurrent remedy, if the glands are very much inflamed and threaten to break; if the glands have already begun to suppurate, the best remedies are *Hep.* and *Silic.*, likewise *Bell.* after *Hep.*, after which, in chronic cases, *Sulph.* after *Bell.* accomplishes a great deal of good, and in many cases *Calc.* after *Sulph.* If the glands are **indurated**, no remedy exceeds *Baryt. carb.* and *Carbo anim.* in curative power, if *Sulph.*, *Calc.*, *Bell.* and *Hep.* are unable to affect this condition. It is immaterial whether the cervical, submaxillary, axillary or inguinal glands are particularly affected.

4. **Goitre.**—I have not yet been able to determine the special indications for each of the different remedies for goitre. I have cured goitre with *Caust.*, *Natr. carb.*, *Iod.*, *Spong.*, *Calc.*, *Brom.* and *Lyc.*, without being able to state the reasons why one remedy which had effected such a rapid and distinguished cure in one case, seemed to be utterly powerless in another case. I generally commence the treatment with *Spong.*, after which, in case of non-success, I give *Sulph.* and afterwards *Iod.* If no success is obtained under this treatment, I give *Natr. carb.* and afterwards *Brom.;* if necessary, I give after *Brom.*, *Calc.*, *Lyc.*, *Caust.* in the order here stated; if these remedies remain without effect, I again resort to *Spong.*, then to *Hep.* and then again to *Iod.*, after which I again give *Sulph.* and *Brom.* The cases where this succession of medicines is required, are indeed few; if *Brom.*, *Iod.* and *Spong.* do not accomplish any thing, *Calc.*, *Lyc.* or *Caust.* help in many cases. In treating goitre I have had more success among my acquaintances and friends than among my patients; the former persevere, whereas the latter often become impatient, if the treatment is not at once successful. What some physicians observe regarding the propriety of taking the medicine during the decline

of the moon, I have found corroborated by my own experience. [The Iodide of Mercury ointment rubbed upon the goitre in very small quantities, about the one-sixteenth of a grain at a time, is often a successful application, if all other means fail. H.]

5. **Diseases of the bones.**—Whenever these diseases plainly originate in the scrofulous miasm, I commence my treatment, whatever the form of these diseases may be, with *Sulph.*, *Calc.*, *Lyc.* and *Silic.*, given at long intervals, and I have so far had every reason to be satisfied with this management; for although *Silic.* is one of our best bone-remedies, yet its efficacy becomes complete only, if *Sulph.* and *Calc.*, or even *Lyc.* had been given previously. If indicated by the nature of the affection (see below), *Phosph.*, *Phosph. ac.* and *Staphys.*, have likewise been administered by me with excellent effect. In **syphilitic** bone-diseases the following remedies have proved the most effective in my hands. *Merc.*, *Aur.*, *Phosph.*, *Phosph. ac.*, *Kali. iod.* and *Fluor. ac.;* and in **mercurial** bone-diseases, *Aur.*, *Asafœtida*, *Fluor. ac.*, *Mez.*, *Phosph. ac.* and *Staphys.;* in **inflammations**, *Mez.*, *Phosph.*, *Merc.*, *Calc.*, *Phosph. ac.*, *Sulph.*, *Silic.*, *Staphys.;* for **swelling** of the bones, *Silic.*, *Calc.*, *Sulph.*, *Asa.*, *Aur.*, *Lyc.*, *Merc.*, *Fluor. ac.*, *Staphys.;* in **curvatures**, *Sulph.*, *Calc.*, *Lyc.*, *Silic.*, and as intercurrent remedies frequently, *Bell.*, *Puls.*, *Asafœtida;* in **necrosis**, *Silic.*, *Calc.*, *Sulph.;* in **caries**, *Silic.*, *Sulph.*, *Calc.*, *Nitr. ac.*, *Aur.*, *Fluor. ac.*, *Asafœtida.* I wish to state at the same time that, in chronic bone-diseases, I have achieved more success by giving during the first week, one, two or at most three doses of the appropriate remedy, dry on the tongue, each dose consisting of two globules of the 30th attenuation, than by giving the remedies in form of a watery solution, a teaspoonful morning and night, for a week or a fortnight in succession.

6. **Dropsies.**—Although these conditions have nothing in common with glands and bones, and only occasionally with scrofulous or tubercular conditions of which dropsy may sometimes constitute a final termination, yet it has seemed to me that, unless I wished to devote a special chapter to these disorganizations, the present chapter is the most appropriate place for their more special consideration, with the exception of certain forms of anasarca, most dropsies are not idiopathic diseases, but only symptoms of

other, most commonly organic affections. Hahnemann once expressed this opinion to me in the following language which shows at the same time in what sense he understood the propriety of rejecting names of diseases. "Even pretended homœopaths assail me for repudiating the old names of diseases. But what advantage do these gentlemen derive from names that do not even designate idiopathic diseases, **dropsy**, for instance. Have they ever seen a disease like dropsy, by which a person, in otherwise perfect conditions of health, can be assailed without any internal cause, as he can by influenza, whooping-cough, scarlatina, erysipelas, pleurisy, and other idiopathic diseases, which, as such, are alone entitled to retain their names, whereas such diseases as dropsy and the like are mere symptoms and not entitled to be designated by any particular names? This distinction does not seem to be comprehended by my critics, or rather they comprehend it well enough, but are not willing to comprehend it for no other reason than because they wish to oppose me." This shows that, even as early as the year 1834, Hahnemann was much nearer the truth than many of his critics among the pretended men of progress. Yet even such names as **dropsy** may be made use of as long as we do not understand any idiopathic diseases but purely symptomatic manifestations by such designations; for there are dropsies, such as acute and chronic hydrocephalus, hydrocele, and even dropsy of the uterus, and certain forms of anasarca resulting from a cold, suppression of exanthems, debility caused by great loss of blood, or from fever and ague, that seem to have a rather idiopathic character; whereas hydrothorax and ascites are most generally only terminations of chronic diseases of the heart, liver, lungs and abdominal viscera. Hydrocephalus as well as hydrocele have already been spoken of in former chapters, so that all that remains for us to do in this place is to offer a few remarks on dropsy generally. And in the first place I must here state that, whereas dropsies arising suddenly in consequence of some externally acting cause, and which might be termed acute, are generally cured with great ease and rapidity, chronic dropsies are but little amenable to art; as a general rule not even relief can be afforded in chronic dropsies depending upon organic diseases of the heart, liver, uterus and ovaries, more particularly if the cases are of long standing and tapping had already frequently been resorted to. In some cases I have succeeded in removing a swelling of the lower

limbs consequent upon cardiac hypertrophies, and which had already reached the abdomen, for four, eight and even eighteen months, two or three times in the same patient whenever the effusion returned again, until finally *Lyc.* did no more than *Ars.* and *Digit.*, and the patient succumbed. In all such cases if *Lyc.* had no effect, after *Arsen.* had proved powerless, I had to abandon the case as hopeless. In acute dropsy I have derived the best assistance from *Hell.*, *Dulc.*, *China*, *Apis*, *Ars.*, *Colch.*, *Lyc.* and *Sulph.*, [also *Acon.* and *Apocynum.* H.], more particularly when caused by a **cold**, *Dulc.*, *Ars.*, *Apis* [also *Acon.* and *Apocyn.* H.]; by **suppression of exanthems**, *Hell.*, *Apis*, *Ars.*, *Sulph.;* after **fever** and **ague**, *Arsen.*, *Fer.*, *Sulph.;* after **loss of blood**, *China Sulph.*, *Fer.;* with **menstrual** irregularities, *Apis.*, *Lyc.;* in **chronic** cases, and more especially in **heart-disease**, *Arsen.*, *Lyc.*, *Carbo veg.;* if attended with **liver-disease**, *Lyc.*, *China*, *Fer.*, *Ars.*, *Merc.;* with **renal** affections, *Ars.*, *Lyc.*, *Colch.* [also *Canthar.* and *Cochineal.* H.] For **anasarca** principally, *Hell.*, *Arsen.*, *Apis.*, *Lyc.*, *Sulph.*, *Dulc.;* for **hydrothorax**, *Ars.*, *Carbo veg.*, *Colch.*, *Lyc.*, *Kali carb.*, *Apis.;* for **ascites** especially, *Sulph.*, *Arsen.*, *Apis*, *China*, *Bry.;* for **hydropericardia**, principally, *Arsen.*, *Lyc.*, *Kali carb.;* for **dropsy** of the **uterus**, *Sulph.*, *Apis;* for dropsy of the **ovaries**, *Bry.*, *Apis.*

## CHAPTER XXVII.

## FEBRILE EXANTHEMATA.

### 1. Scarlatina.

**General Remarks.**—Although at the present time scarlatina generally sets in in a very mild and benign form, and I have seen cases where desquamation set in already in eight days and the patients went out again on the tenth day contrary to all rules of prudence and discretion, without however being injured by such exposure in the least; yet, in the case of scrofulous persons, scarlatina may likewise assume a very malignant form, with gangrenous angina, threatening cerebral symptoms, and even acute hydrocephalus in the case of children, and likewise with considerable and sometimes dangerous sequelæ, among which acute anasarca, croup or diphtheritis and a very severe and readily suppurating parotitis are the most important. At the onset such a fever may have a very mild character, and the exanthem may break out without any serious symptoms, when all at once, without any perceptible cause and in spite of the most careful conduct on the part of the patient, the disease takes a very bad turn in any stage, from its precursory symptoms to the period of desquamation. As long as this process is not terminated, the physician cannot be sufficiently on his guard; such malignant cases may arise even under the best homœopathic treatment. I have seen all these complications occur, if not the whole of them simultaneously, yet each of them by itself, among patients of the most varied constitutions, more particularly in the case of feeble and sickly children, whose previously-existing morbid predispositions the scarlatina probably tended to develop with more rapidity. For this reason we will dwell a little more fully on 1, **simple scarlatina,** 2, on the **complications**, and 3, on the **sequelæ.**

1. **Simple scarlatina.**—If, during an epidemic, the first

premonitory symptoms attack a person in health, such as, angina with a peculiar scarlet-redness of the fauces, with which vomiting and headache may sometimes be associated, *Bell.* in such circumstances is rather hurtful than useful, inasmuch as it may impede the breaking out of the exanthem and by this means expose the lives of the patients to great danger. I once treated a child where, on my second visit, I found the patient cold, pale and in a soporous condition. *Bry.* very soon brought the eruption out. Altogether in our modern scarlatina *Bell.* is not nearly as often and absolutely indicated as one would suppose; it is really appropriate only in cases where the smooth **scarlet-exanthem is accompanied by headache and congestions** and more or less marked symptoms of cerebral irritation; but if paralysis of the brain threaten, *Sulph.* or *Zinc.* alone helps. Ever since I had an opportunity of testing the excellence of Hering's advice to give *Sulph.* if the skin looks red like a boiled lobster, I have employed *Sulph.*, even if this redness was not yet visible, in the precursory stage of the disease, following it up sometimes with *Calc.*, by which means I have succeeded in many cases in imparting to the exanthem a benign character so that no other treatment was required to secure an easy termination of the disease without any further dangerous complications. If the exanthem should recede again after it was fairly out, *Bry.* will often bring it out again, and, with *Cupr.* and *Apis* will often avert the ensuing and threatening cerebral symptoms; if the chest is seriously affected, *Ipec.*, or still more certainly *Calc.* will help; if the exanthem remains very scanty, with typhoid symptoms, *Ars.* may very generally be depended upon, likewise *Rhus t.; Verat. alb.*, if it had a bluish or violet color, with a feeble pulse, or likewise *Amm. carb.* If the angina is very prominent, and the cellular tissue in the neighborhood of the cervical glands is very much swollen, *Calc.* is to be applied to; if the chest is seriously invaded and the lungs are threatened with paralysis, *Calc.*, *Phosph.* or *Carbo veg.* are the remedies; if the cerebral symptoms are most prominent, *Sulph.*, *Zinc.*, *Cupr.*, *Bell.*

2. **Complications of scarlatina.**—Sometimes scarlatina is complicated with rash, or it is altogether scarlet-rash. In such cases *Acon.* which is given to moderate the fever, if followed by *Rhus t.* sometimes removes the whole disease; if not, *Sulph.* and *Calc.* may be given. Measles and scarlatina may exist together.

I have treated a remarkable case of this sort of complication. The patient was a girl 16 years old. The catarrhal symptoms peculiar to measles first made their appearance, after which the scarlatina-angina set in with a most violent fever without any exanthem breaking out. *Bry.* developed the eruption over night, consisting of measle-spots and scarlet-rash, but upon the whole running a benign course under the continued action of *Bry.*, and finally terminating in the scarlatina-desquamation of large patches of skin. This exanthem, however, was no protection against measles; for when, two years after this event, her two sisters, who had remained free previously, were attacked with measles, she was likewise laid up with this disease. If hydrocephalus threatens, as may be the case in the complications with scarlet-rash, no remedy is better calculated than *Sulph.* to counteract this dangerous condition of things. *Bell.* is scarcely ever of any use in such cases; *Zinc.* is sometimes a good remedy. If gangrenous angina supervenes, the case is often desperate; *Ars.*, and sometimes *Carbo veg.* or *Amm. carb.* may afford relief and save the patient. Strictly speaking, croup and diphtheritis are neither complications nor sequelæ of scarlatina, inasmuch as, if they do break out, they generally do not show themselves until some weeks after.

3. **Sequelæ of scarlatina.**—Parotitis after scarlatina has occurred to me several times in its suppurative stage. Hering's suggestions in reference to this point have seemed to me exceedingly correct. If the swelling is seen at the onset, there is no better remedy than *Rhus t.* recommended by Hering, and, if this does not help very speedily, *Ars.* or *Calc.* As a rule the swelling soon disappears again under the use of the two first-named drugs. It is only if children come to us from allopathic hands, or if they had been badly managed homœopathically, that the gland is often seen discharging a malignant, ichorous pus. If, in such circumstances, *Ars.* does not help, *Calc.* will be found indispensable, and will often be sufficient to save the child. The symptoms need not necessarily be worse from three to six in the morning; if they are worse soon after midnight, about one or two o'clock in the morning, as occurred in one of my cases, and *Calc.* has no effect, *Kali carb.* will certainly help; likewise *Lyc.*, if *Calc.* and *Kali* have improved the case, but swelling and suppuration still remain indisposed to yield. In my own cases *Lyc.* always completed a

cure. Even in other glandular swellings on the neck and inferior maxilla *Calc.* often helps alone without the aid of any other drug; if any swelling should remain, *Lyc.* or *Baryt. carb.* removes it. If dropsy sets in after scarlatina, *Ars.* and *Apis* generally help most; sometimes also *Hell.*, *Bry.*, *Colch.*, *Lyc.* or *Sulph.* and *Calc.*, [also *Apoc. cannab.* H.]

## 2. Measles.

1. **Simple course.**—Like scarlatina, measles may run a benign as well as malignant course. Sometimes the children do not even remain in bed and go out again in a week. There are cases when even the catarrhal premonitory symptoms are absent, there is only a little vomiting and diarrhœa, and yet the disease remains mild and without any complications. If during an epidemic the first premonitory symptoms make their appearance, *Puls.* often annihilates the whole disease; it must not be given however to women while they have their courses; in a case of this kind it once arrested the menses, suppressed the eruption which was on the point of making its appearance, and developed such threatening cerebral symptoms that the patient would undoubtedly have perished if *Bry.* had not brought back the menses and the eruption. Whenever fever is present, I always give *Acon.* in the first place, which not only moderates the fever but likewise the restlessness and the distressing cough, so that these two symptoms do not require any further medication and the eruption runs its course under the continued use of *Acon.* without any dangerous complications. If the exanthem remains suppressed in spite of the use of *Acon.*, and the fever does not abate in the least, one of the most important remedies that should always be employed first, is *Bry.;* if this does not help, and the extremities grow cold, the patient is very weak, and the pulse small and intermittent, *Verat. alb.* is the most desirable remedy, and sometimes *Ars.*, *Carbo veg.* and *Phosph.;* or, in accordance with Hering's very true and correct observation, *Camph.;* even in the worst cases of this kind two globules of the 30th attenuation dry on the child's tongue, acting more reliably than the tincture which sometimes likewise induces an apparent improvement, but is followed by a reaction that finally

proves fatal after all. What some writers have stated concerning the power of *Euph.*, *Merc.* and *Puls.*, to bring back a suppressed measle-exanthem, I am not able to corroborate; these remedies indeed serve to appease certain symptoms, but they do not reproduce the exanthem as certainly as the other remedies. If the appearance of the eruption is delayed and vomiting sets in, *Ant. cr.* often favors the development of the exanthem; so does *Ipec.* if dyspnœa prevails. If the eruption is fairly out, and *Acon.* does not moderate the fever, (which happens very rarely and only in the case of scrofulous children), the great remedy in such cases is likewise *Sulph.*, which brings the whole disease to a favorable end. If *Acon.* or *Sulph.* is administered for the fever in accordance with these directions, the medicines recommended by some physicians as intercurrent remedies, such as *Cupr.* for severe catarrhal symptoms, with irritation of the eyes; *Bry.* for inflammatory irritation of the bronchia etc., generally become unnecessary, inasmuch as *Acon.* and *Sulph.*, while moderating the fever, most generally remove the cough, restlessness, lachrymation etc.; whereas it would be indiscreet, as long as the fever is not hushed, to give *Coff.*, *Phosph.*, *Bell.*, *Merc.* or *Euph.*, for isolated, troublesome symptoms. It is only if, after the fever is subdued, certain symptoms remain troublesome so as to deserve particular consideration, that it may be necessary to resort to one or the other of the above-mentioned remedies, as may be seen in the next number, 2, headed complications of measles.

2. **Complications of Measles.**—These appear either during the fever or after the suppression of the exanthem, disappearing either simultaneous with the fever or with reappearance of the exanthem on the skin; or else they obstinately persist in either of these events. These complications, as such, should not be heeded until the remedies mentioned in No 1, have either subdued the fever or brought back the suppressed eruption. Not till the fever persists, and the exanthem remains obstinately suppressed, a direct use of remedial means against these complications becomes necessary; in which case the following remedies have to be employed, for **cerebral affections**, *Bell.*, *Ars.*, *Cupr.;* for severe **irritation** of the **eyes** with or without coryza, *Puls.*, *Euphras.*, *Sulph.*, *Ars.*, *Merc.;* for **swelling** of the **parotid** glands, *Arn.*, *Dulc.*, *Ars.;* for **aphthæ** or **ulcers** in the mouth or throat,

*Sulph.*, *Merc.*, *Ars.;* for **diphtheritis**, *Apis*, *Bell.*, *Ars.*, *Phosph.;* for **sore throat** with profuse catarrh, *Carbo veg.*, *Dros.*, *Puls.;* for **colic** and **diarrhœa**, mostly, *Cham.*, *Phosph.*, *Sulph.*, *Verat. alb.;* for **vomiting**, *Ant. cr.*, *Ipec.*, *Puls.;* for **dyspnœa**, *Ipec.;* for continued **dry cough**, *Coff.* or *Cham.;* for a cough like **whooping-cough**, *Dros.* or *Cina;* for **croupy** symptoms, *Acon.*, *Hep.* or *Ars.;* for inflammatory chest-symptoms, bronchitis etc., *Phosph.*, *Bry.*, *Acon.;* for **spasmodic** symptoms, convulsions etc., *Bell.*, or *Coff.;* for subsequent long-lasting **sleeplessness**, generally, *Coff.*, *Bell.* or *Sulph.;* for great **weakness**, with apathy, delirium and alternate heat and coldness, *Verat. alb.* or *Carbo veg.;* for **typhoid** symptoms with or without petechiæ, *Rhus t.*, *Arsen.*, *Phosph.*, *Sulph.* or *Carbo veg.*

3. **Sequelæ of the measles.**—Under careful homœopathic treatment these after-diseases, which are generally much more dangerous than the measles themselves, scarcely ever occur, or only in malignant cases, if the physician is not called at the commencement of the attack, or the patient exposes himself indiscreetly and prematurely to the open air, and moreover is tainted with a predisposition to the subsequent diseases. The most dangerous sequela is undoubtedly **acute pneumonia**, which generally terminates in galoping consumption or hydrothorax, but, if taken in time, may be favorably acted upon by means of *Bry.*, very frequently by means of *Phosph.*, *Sulph.* and *Calc.*, and no less by *Puls.* For a **dry** cough alone, without any other symptom, *Coff.* and *Cham.* are efficient remedies; for chronic **hoarseness**, generally, *Carbo veg.*, *Dros.*, *Dulc.* or *Sulph.;* for chronic **mucous cough**, especially, *Puls.* and *Sulph.*, and sometimes *Dulc.;* for **spasmodic** cough, particularly, *Bell.* or *Carbo veg.*, and sometimes *Cina* or *Hyosc.* Equally dangerous as pneumonia after measles, is enteritis, which generally terminates in ulcerous disorganization with hectic fever. If hectic fever has set in, I know of no remedy that can save the patient's life. Three children to whom I was called at this stage, were even past mending, but died ten days or a fortnight after my first prescription. If the disease is not too far advanced, *Phosph.*, *Sulph.*, *Ars.*, *Rhus t.* or *Verat. alb.* may still help, each according to special indications. Chronic diarrhœa as a sequela is most commonly easily checked by *Puls.* or *Sulph.*, and sometimes by *Merc.* or *China.* For the subsequent photophobia, the following remedies are the most suitable: *Acon.*, *Puls.*, *Bell.*, *Phosph.* or

*Sulph.* For the otorrhœa, particularly, *Puls.*, *Carbo veg.*, *Sulph.*, *Merc.*, *Lyc.*, and sometimes *Nitr. ac.*, *Menyanth.* and *Colch.*

### 3. Purple-rash and Rubeola.

1. **Purple-rash.**—Of genuine purple-rash, with claret-colored spots upon which are seated small granules deeply imbedded in the skin, I have seen an epidemic in Belgium, where, as well as in Holland, this disease still seems to break out epidemically in its genuine form. In case of violent fever, *Acon.* helped, and, if this was not sufficient, *Sulph.* *Coff.* was not much resorted to, because the abatement of the fever by *Acon.* was likewise accompanied by a mitigation of the nervous restlessness and irritation. The alternate use of *Coff.* and *Acon.*, empirically, retarded the cure; if, after *Acon.* had proved insufficient, *Sulph.* was given for 24 hours, *Acon.* might then again be given with great benefit, after which, if *Acon.* ceased to affect the case favorably, *Sulph.* was again given with great advantage and was continued to the end, without any untoward complications. Threatening sequelæ never occurred in this epidemic; but under allopathic treatment fatal metastases to the brain, for which *Calc.* sometimes proved efficient; or to the heart, which most readily yielded to *Ars.*, often occurred, but never in the case of patients who were treated from the start with *Acon.* and *Sulph.*

2. **Roseolæ.**—In this disease, which is unattended by the least danger and may safely be allowed to run its course without medicine, *Acon.* is generally quite sufficient if the fever runs rather high; this disease likewise is safely brought to a favorable termination by means of *Sulph.*, after the previous exhibition of *Acon.* If catarrhal symptoms remain, *Puls.* is sometimes of use, and for sore throat, *Bell.*

### 4. Variola, Small-pox.

1. **General observations.**—Although small-pox at the present time breaks out rather sporadically, and is not near as terrible a disease as it was before its fierceness had been moderated

by the introduction of vaccination, yet very bad cases still occur, especially among the poorer classes, not only among children that had not been vaccinated, but likewise among adults that had; I have even seen a husband and his wife attacked by small-pox, after they had had an attack in former years and their pitted faces might have led one to suppose that they were sufficiently protected against another invasion. If this disease comes under homœopathic management as soon as the preliminary stage sets in, it can be made to run a mild course without any dangerous complications, sometimes in less than a fortnight, although very severe cases may run a longer period. The invasion of the throat by the pocks is a very bad symptom which may lead to asphyxia, and for which, if the pocks are numerous and firmly seated, art can do nothing. In the case of a mother, whose daughter had died of such a symptom under allopathic treatment, and in whose throat several pocks had already broken out, immediate re-vaccination, which was insisted upon by the patient, had a speedy effect, so that no new pocks broke out in the throat and the old ones dried up very speedily; *Variolin* might perhaps have had the same effect as re-vaccination, although this substance does not always help.

2. **Treatment of simple variola.**—It is sometimes very difficult to distinguish the symptoms of the preliminary stage of small-pox from those of typhoid fever. It has not only happened to me but to many other physicians of both schools that in isolated cases when no small-pox was about, this preliminary stage of small-pox was mistaken for incipient typhus until the little stigmata made their appearance upon the skin. On former occasions, when I knew that variola had broken out in the hospitals, I was in the habit of prescribing *Rhus t.*, and giving *Sulph.* as soon as the stigmata were seen; I continued this agent until desquamation had fully set in, and, by this means, the disease generally ran a very mild course; since I have tried *Variolin*, I prescribe this substance at the commencement of the disease, which is generally abbreviated by it more than by any other agent. In the few cases where the disease breaks out with its former fierceness in spite of the variolin, I again have recourse to *Sulph.* which, if given after variolin, even acts more favorably than in former times. If I am called after the exanthem is fully out, in the sup-

purative stage, I likewise commence the treatment with *Variolin;* here too, if variolin does not seem to act with its usual efficacy and promptness, I have recourse to *Sulph.*, by which means I cure my patient more speedily and leave him less pitted than either with *Thuja* or *Merc.*

3. **Complications.**—Under the variolin-treatment these do not really occur, or, if they do, they soon disappear under the continued use of this drug. If they do not, I have formerly given with excellent success, for much **headache,** with or without nausea or vomiting, *Bell.*, *Bry.*, *Rhus t.;* for **angina facecium,** *Sulph.*, *Merc.*, *Ars.;* for **diarrhœa** during the suppurative stage, *Merc.*, *Sulph.*, *Ars.;* for **putrid** conditions with **bluish, violet** or **blackish** pocks, *Ars.*, *Tart. emet.*, *China*, *Carbo veg.*, *Phosph. ac.*, *Sulph.;* for **confluent** small-pox, *Tart. emet.* or *Ars.;* for a **tardy** setting in of the suppurative stage, *Sulph.*, *Merc.* or *Ars.;* for **bloody** pocks, such as sometimes attack women afflicted with menstrual disturbances, *Arsen.*, *Phosph.* or *Laches.*

### 5. Varioloid and Varicella.

1. **Varioloid.**—In this form of small-pox *Variolin* likewise does a great deal of good, but *Sulph.* is the main remedy; in the eruptive stage, or even before, if the patient complains of violent **headache,** with vomiting and nausea, *Bell.*, *Bry.* or *Rhus t.* are the best remedies.

2. **Varicella,** chicken-pox.—If the eruption is so severe that medical interference is required, *Tart. emet.* or *Puls.*, and likewise *Sulph.* help very speedily.

### 6. Non-Contagious Eruptive Fevers.

1. **Miliaria rubra** (in French *fièvre rouge*) not unfrequently breaks out as an epidemic, and generally commences with dyspnœa, colic and a fainting sort of nausea; all these symptoms abate after the breaking out of the rash. At this stage of the disease *Ipec.* is a true specific. If the rash has broken out, and

the fever is not entirely subdued, *Acon.*, generally removes very speedily both the fever and the eruption, and if not, *Sulph.*

2. **Urticaria.**—This is very speedily removed by *Dulc.*, *Apis* or *Rhus t.; Dulc.* more particularly if the eruption is caused by a cold and the blotches become more prominent in warmth; but if the urticaria is caused by a cold by exposure to wet, and decreases in cool air, *Rhus* or *Puls.* is preferable; after derangement of the stomach more particularly, *Puls.;* after the use of **crabs,** *Urtica urens;* after **strawberries,** *Bry.;* in **chronic** cases, *Calc.*, *Ars.;* if the urticaria has **receded,** and neither *Calc.* not *Arsen.* is capable of reproducing it, the ailments consequent upon this retrocession and which will neither yield to *Calc.* nor *Ars.*, are often removed by *Apis.*

3. **Erysipelas.**—Smooth erysipelas with fever, no matter what part is affected, is most commonly cured by *Bell.* and *Apis*, and sometimes by *Rhus t.;* in some cases, if all other remedies fail, by *Graph.;* for **vesicular** erysipelas the chief remedy is *Rhus t.*, and if this has no effect, *Apis*, although here too *Graph.* and *Laches.* will sometimes help, *Laches.* more particularly if the vesicles become **gangrenous** or the swelling œdematous. For erysipelas of the **face** and **scalp** the leading remedies are *Bell.*, *Apis*, *Rhus t.* and others that have been indicated in Chap. VII. of the Face; for erysipelas of the **joints** principally *Bry.* and *Sulph.*, likewise *Rhus t.;* for erysipelas **neonatorum** principally, *Bell.*, *Rhus t.* and *Sulph.* If the erysipelas disappears suddenly, *Bry.* and *Cupr.* help in most cases; in addition to these *Ars.*, if threatening cerebral symptoms set in, attended with severe prostration and fainting turns.

4. **Zona,** Zoster.—I am well aware that *Rhus t.* and *Graph.*, and even *Graph.*, *Merc.* and *Puls.* will sometimes cure Zona; the chief remedy, however, that a beginning homœopath should never lose sight of, is undoubtedly *Ars.* I have not had a case for the last fifteen years where this remedy did not remove the eruption as well as the pains within ten days after the eruption first broke out. Such an eruption is likewise seen to disappear within 25 days under the use of *Merc.*, *Puls.*, *Graph.* and *Rhus t.*, or even in two or three days, if the treatment is commenced on

the 23d day after the exanthem first made its appearance; in such a case, however, it is not by these remedies that a cure is effected; the exanthem which scarcely ever remains out more than 25 days, disappeared of itself. This is so much more certain if, after such a pretended cure, obstinate neuralgic pains still remain, such as I have often observed in my own cases which, agreeably to the recommendations of our speculative critics, I had treated with *Rhus t.*, *Graph.*, *Puls.* and *Merc.* [I have cured many cases of Zona around the neck, waist, arms and thighs, with much burning distress in the vesicles, chiefly with *Acon.* and an occasional dose of *Ars.* H.]

5. **Peliosis, Purpura hæmorrhagica.**—Strictly speaking this disease does not belong among the febrile exanthemata, since only the rheumatic form of purpura is attended with more or less fever, whereas the purpura hæmorrhagica werlhofii is really without any fever. The febrile form of peliosis most commonly attacks people that had been suffering with rheumatism for years, or are still suffering with it. It is known by small, lentil-sized, isolated spots of a dingy-brown color, which subsequently scale off like bran; it has neither bloody blisters in the mouth, nor hæmorrhages from other organs like the true purpura hæmorrhagica werlhofii. A radical cure of this form of purpura is moreover very difficult on account of the liability to relapses to which such patients are subject from the least change in the weather. Nevertheless *Rhus* and *Bry.*, and likewise *Arn.*, *China* and *Sulph.* have often rendered me essential service in this form of purpura. The large-spotted purpura werlhofii, on the contrary, the incipient small spots of which never fail to spread with great rapidity and to run into one another, sometimes giving rise to ecchymoses as big as the palms of the hands, and which are frequently accompanied by hæmorrhages from the mouth and nose, is most generally best controlled by *Bry.*, *Rhus t.*, *Phosph.* [also *Phosph. ac.* H.] *Sulph.* (preferable to *Sulph. ac.*) or *Ars.* As regards this last-named remedy, which I had never before used in the treatment of purpura, I may be permitted to relate a case which is one of the most desperate cases I ever heard of. One evening I was called to a young lady who had been living in extreme indigence for some six weeks, and had only had a very scanty supply of nourishment on three or four days in the week.

One of her relatives conducted me to her to relieve her of a terrible menorrhagia that had weakened her to such an extent that she was unable to leave her bed. I prescribed *China* 30th, two globules in a few tablespoonfuls of water, a teaspoonful of which solution was to be taken every half hour until I should see her again early next morning. Next morning the menorrhagia was not only not improved, but hæmorrhages from the nose and mouth had supervened; on the skin generally no spots could as yet be perceived. I now prescribed *Phosph.* 30th, two globules in water, to be taken in the same manner as the *China*, and, in case of improvement, to be continued every hour until my evening-visit. During the day I received a written message that the hæmorrhage continued to increase all the time, and that the patient fell from one syncope into another. Not being at home when this message arrived, I did not see my patient again until evening, when I found her in a most desperate condition. With the hæmorrhages from the uterus, mouth and nose, spots and blisters of the size of a dollar had become associated in the mouth and on the skin of the whole body; pure blood oozed from these spots and the patient, who still retained her full consciousness, lay like a corpse, with deathlike pallor of the hippocratic countenance, dull, lustreless eyes, and icy-coldness of the whole body, as if perfectly inanimate. Although I had not a ray of hope of saving her, yet I placed two globules of *Ars.* 30th, dry on her tongue, leaving at the same time a watery solution of the same dose with instructions to administer it in the same manner as either of the other remedies, and, if anything untoward should happen, to send for me in the night. I was not sent for, but next morning at seven o'clock I received a note that had been written the evening previous shortly after my departure, and wherein I was requested not to trouble myself with any further visits, and that an old-school physician had been sent for. I heard nothing further of my patient and thought her in her grave, when six months afterwards a young couple walked into my office and I was asked by the young man who was a stranger to me, whether I remembered a dying young woman whom I had been treating for hæmorrhage. I replied, Yes, and said moreover that if no other physician had been sent for, and my last prescription had been continued, she would probably still be in the land of the living. "She did continue your medicine," now interrupted the pale young woman but who otherwise

seemed to enjoy good health; "she continued your medicine, and the medicine of the other doctor was poured out of the window, and this is the reason why she now stands here before you restored to life and health, and married, and wishes to know how much she owes you." When I heard these words, I was scarcely able to believe my senses; nevertheless, she was the identical person; the more I looked at her and heard her talk, the better I recognized the voice and features of my former patient, and I now heard for the first time that the physician whom one of her relatives had sent for, had told the family that nothing could be done for the young lady and that she would certainly die over night; nevertheless he was willing to leave a prescription and to call again the following morning. Before his prescription arrived from the pharmacy, the two globules of *Ars.* had already effected a considerable decrease of the hæmorrhage, and the family concluded to continue my watery solution of *Ars.* and, the improvement progressing all the time, to have it renewed by the apothecary, so that eight days after my last visit, the patient was completely restored. Such miracles are performed even by the smallest doses of appropriately-selected remedies.

## CHAPTER XXVIII.

## CHRONIC CUTANEOUS ERUPTIONS.

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### 1. Moist, Humid Eruptions.

1. **Eczema.**—Dermatologists adopt several species of eczema which are of more or less practical importance. The impetiginous eczema has pustules of some size, and often forms crusts and scurfs; whereas the so-called red eczema often covers some portions of the body for years without occasioning any other inconvenience than a distressing itching, with sore places on the skin that usually became covered with thin, bran-shaped scurfs.

Except the eczema solare (heat-blisters), which breaks out in hot summer-weather and always disappears of itself as the weather grows cooler, eczema generally is not always easily cured, more particularly if it breaks out at the anus, scrotum, pudendum and on the limbs, back or neck. Nevertheless I have had fine success with *Dulc.*, *Rhus t.*, *Mez.*, *Graph.*, *Calc.* and *Sulph.*, and sometimes with *Ars.*, if the patient complained of a good deal of itching and burning. For the red eczema at the anus, scrotum and pudendum the most efficient remedies are *Dulc.*, *Mez.*, *Sulph.*, *Petrol.*, *Sep.*, *Graph.*, *Lyc.*, *Carbo veg.* and *Kali carb.* The impetiginous eczema which is apt to break out on the hands and fingers and is readily confounded with the itch, is most generally cured by means of *Merc.*, *Carbo veg.*, *Sep.* and *Sulph.;* eczema of the ears by means of *Graph.*, *Merc.*, *Laches.;* eczema of the nose and lips by *Alum.*, *Graph.*, *Kali carb.*, *Sepia*, *Phosph.*

2. The **Itch, scabies.**—Those who assert to this day that the itch can be cured without local applications, by the exclusive use of internal remedies, may be correct not only as regards certain itch-like exanthemata that are easily confounded with this exanthem, but likewise as regards the itch itself; insofar, at any rate, as the various disorders which the poison of the acarus occa-

sions in the interior of the organism, can and should only be cured by means of internal treatment. But the acari themselves cannot be extirpated by internal remedies; if the true acarus-itch is said to have been cured by internal remedies alone, it must either have been one of those exanthems which are easily confounded with the itch, or else the patients had already previously used external applications. No more can the tinea caused by lice be removed without this vermin being destroyed first, than the acarus-itch can be cured without the previous destruction of the acarus. I have known a man who was infected with the true acarus-itch and who, living in the country and treating himself, was unwilling, as a steadfast partisan of homœopathic treatment, to employ any external applications. According to the best indications he had been treating himself for six months with *Merc.*, *Sulph.*, *Caust.*, *Sepia*, without achieving any other result than that the eruption spread from day to day, until, when I first saw him, his whole skin was studded with eruptions of every variety, between which brown scurfs might be discovered on places that had been raw before; these were associated with pustules of the size of peas, and with large dark-red boils on the thighs, buttocks and back, some of which were just forming and others had already become indurated, and which imparted to the patient the appearance of a second Job, and almost drove him to despair by their distressing, nocturnal itching, which deprived him of all sleep. Not only the wrists and the inside of the fingers (which, like the sexual parts were made rigid by the scurfs with which they were covered), but likewise the bends of the knees and elbows, the axillæ, feet, abdomen and sexual organs were covered with a multitude of the primary itch-vesicles, the abodes of the acari, which it was not difficult to find in them. I encouraged the poor man and ordered him to rub the oil of lavender morning and evening on the itching parts without touching those that were covered with the exanthem but did not itch. In four days the itching had considerably abated, and in eight days it had almost entirely ceased, so that the poor man, despite his ulcers, boils, rhagades and scurfs with which his skin was covered, felt as if he were in Paradise, for he now was able to sleep quietly. In order to cure these horrid products of the acari and their poison, I now gave him *Sulph.* 30th, two globules, after which a great improvement set in and the finer exanthem disappeared; the scurfs and the boils however ob-

stinately persisted. A similar dose of *Merc.*, repeated two or three times within a fortnight, improved the crusts so that the patient was able to move the fingers with greater ease; the large pustules and the boils, however, remained unchanged. I now gave him *Sep.* 30th, one dose, after which some pustules began to dry up even on the third day, the crusts likewise continued to improve and in three weeks after the *Sep.* had been given, all the scurfs and pustules had healed and no other new symptoms broke out except some boils and a few rhagades on the fingers and hands. For these remaining symptoms I gave *Calc.* which had such an astonishing effect that two months after, when I saw the patient again, who had to leave Paris immediately after this dose had been taken, every sign of the itch, including the indurated boils, had disappeared and his skin was as clean from head to foot, as if he had never been sick. Of all the various means that have been recommended for the extirpation of the acarus, such as brown soap, dilute sulphuric acid, sulphur ointment, tincture of Staphysagria, even absolute alcohol, I have not found any thing so agreeable and speedily effective as the refined oil of Lavender. If a person affected with the itch comes to me for treatment, I direct him to prepare a roll of cloth or flannel of the thickness of a thumb, and firmly tied around with a thread, and with one end of the roll abundantly soaked with the oil, to rub or simply moisten the spots where the acarus is located, morning and evening, for five minutes at a time, according as the affected portion of the skin is firmer, as for instance on the fingers and wrists, or more delicate as in the bends of the knees and elbows; in at most eight, or sometimes even in four days, no living acarus can any more be found, provided the patient takes care to touch or rub every single itching spot with the oil. At the same time as I direct him to touch the itching spots with the oil, without omitting a single one of them, I also instruct him to avoid the spots covered with the eruption and which do not itch. If all the acari are destroyed, I give *Sulph.*, if the existing eruption is dry and finely granular; and if *Sulph.* does not remove it, I then give, according to circumstances, *Sep.*, *Carbo veg.*, *Hepar sulph.* or *Calc.;* if the eruption is rather pustulous or purulent, I prescribe *Merc.*, *Sulph.* or *Caust.*, and sometimes *Sepia.* Whether the case reported by Dr. Fielitz in Rueckert Vol. IV. page 214, and which was cured with *Sep.*, was really a case of pustulous scabies and

not rather a simple ecthyma which never shows a trace of acari and may occur precisely like the itch, on the hands, fingers and elbow joints, and which I have likewise cured with *Sep.*, is not quite clear to me, for the additional reason that after the ulcers were healed, desquamation took place, a phenomenon that I have often known to occur after the healing of ecthymatous ulcers, but never after the ulcers caused by scabies. It is a pity that the report does not specify whether the characteristic itch-vesicles were either present or absent, since it is by this sign alone that the ecthyma which sometimes breaks out on the extremities, is distinguished from the true pustulous itch. What induced me to give *Sep.* in the above-mentioned case, was that the pustules so closely resembled the ecthyma-pustules that I have almost always cured them with *Sep.* The isolated, scattered pustules on the abdomen, back and nape of the neck which occurred in Fielitz' case without the various forms of itch-exanthem which were at the same time present in my own case, constitute in this very form a symptom of ecthyma, but not of the itch. (See below, No. 8, **Ecthyma.**) For this reason *Sep.* is so much more certainly indicated in the itch, if the various forms of itch-exanthem resemble the pustules of ecthyma. In recent cases of scabies the few vesicles which sometimes cover the flexor-surface of the forearm, most generally disappear of themselves after the acarus is once destroyed, in the same manner as the tinea caused by lice, very speedily dries up and disappears after the lice are once exterminated. As soon as the lavender-oil has killed the acari, I at once administer *Sulph.*, and afterwards *Calc.* and *Sep.* at long intervals.

3. **Crusta serpiginosa.**—This tetter, which not only breaks out in the face but sometimes also on other parts of the body, seems to attack only children, as far as my experience goes; beginning in front of the ear, it spreads over the face, sometimes beyond the eyelids and invades even the hairy-scalp. In the cases that I have had to treat, the most effective remedies were, *Sulph.*, *Rhus t.*, *Ars.*, and sometimes *Calc.* and *Dulc.*

4. **Acne.**—For simple **acne** (acne disseminata), such as very frequently breaks out on the forehead, cheeks and shoulders of young people, I have found the following remedies the most effective: *Bell.*, *Carbo veg.* and *Sulph.;* for the **indurated acne,**

*Carbo veg.*, *Ledum*, *Sulph.;* for **miliary acne,** consisting of fine granules, and mostly seated on the forehead of young girls, *Sulph.*, *Calc.*, *Nitr. ac.;* for **acne punctata,** *Sulph.* and *Nitr. ac.;* for **acne vermiformis,** the so-called comedones, especially, *Sulph.*, *Selenium*, *Graph.* and *Nitr. ac.*

5. **Acne rosacea.**—*Rhus t.*, *Ruta* and *Verat. alb.*, which have been so highly extolled for this affection, have never achieved in my hands what *Ars.*, *Kreas.* and *Calc.* have done for me. I have never yet been able, however, to cure a single case of this kind with a single remedy, but have had to employ several of them in succession. I have found *Verat. alb.*, *Rhus t.* and *Ruta*, and sometimes even *Cicuta* and *Carbo anim.* very useful.

6. **Mentagra.**—That not only *Mez.*, but still more *Calc.* is eminently useful in this exanthem, has been corroborated by my own experience. I have cured a number of cases with *Calc.* alone, allowing one dose of two globules of the 30th attenuation to act until the improvement, initiated by this one dose, ceased. If anybody, who wishes to achieve such a cure, doubts the necessity of allowing a dose to act undisturbedly as I advise, let him use it as Noack and Trinks teach in their Manual, one or two doses of the third trituration a day; he will soon find out who are the blind guides, and how much more easily he will accomplish his purpose by following the path I have pointed out.

7. **Impetigo.**—Whatever form this humid or suppurating crusty eruption may assume, whether the form of scattered, coherent, gnawing, crusty or granular impetigo, and whatever locality it may choose, the face, hairy scalp, trunk or extremities, the chief remedies are *Sulph.* and above all *Calc.;* likewise, *Lyc.*, *Mez.*, *Sepia*, and in some cases even *Rhus t.* and *Ars.* *Merc.* likewise sometimes seems to effect a speedy improvement, but it will always be found an unreliable intercurrent remedy, which, if repeated too often, allows the disease, after a short-lasting apparent cure, to break out again in a worse form than before. For **impetigo larvata,** *Sulph.* or *Calc.* is most frequently useful, sometimes *Rhus t.* or *Ars.;* for impetiginous or moist scald-head the same remedies are applicable.

8. **Ecthyma.**—This exanthem, which is confounded in Hart-

mann's Therapeutics with **rhypia** or **rupia**, and, in its anatomical characteristics is ranged side by side with præputial herpes, has no more in common with the latter, even in its external appearance, than small-pox resembles a common rash. Ecthyma is really an inflammation of the follicular glands of the skin, and generally shows itself in the shape of blotches of the size of lentils or peas, round, mostly isolated, sometimes resembling incipient boils, more or less hard, red and sometimes core-shaped. Their raised summits soon become filled with pus, when they resemble maturing boils as nearly as one egg does another, or, if they are broad at their base, cowpox-pustules. If these pustules break out on the hands, as they sometimes do after the hands have been for a long time in contact with irritating substances, they sometimes, after they have entered upon the suppurative stage and are not too large nor confluent, resemble in a very deceptive manner pustulous scabies, provided the older authors who had no very clear idea either of scabies or ecthyma, have not erroneously described ecthyma in the place of scabies. The following diagnostic signs distinguish ecthyma unmistakeably from true scabies: 1, the ecthyma-pustules are never mingled with itch-vesicles, as is, on the contrary, the case with the pustules of a far-advanced scabies; 2, the ecthyma-pustules, after having reached their maturity, dry up in a week or a fortnight and finally disappear, while new pustules are breaking out elsewhere; whereas the scabies-pustules often persevere for months in the same state, and finally become indurated without ever disappearing again from the skin without the interference of art; 3, If the ecthyma-pustules run into one another, which they are apt to do if placed in close proximity to each other, this confluence, if taking place between the thumb and index-finger, or in the hollow of the hand, may occasion considerable irritation owing to the circumstance that the parts are in constant motion, and an inflammatory swelling may arise which, after suppurating, may terminate in a more or less comprehensive ulcer which dries up in 8 or 10 days, becomes covered with a crust and finally, like all larger groups of closely-juxtaposed ecthyma-pustules, leads to desquamation of the skin in large patches, as in scarlatina; nothing analogous of this kind takes place in scabies; 4, the ecthyma-pustules never cause any itching, except perhaps while the process of desiccation is going on; they at most cause a burning pain like the blisters of shingles. The chief distinctive diagnostic sign is,

however, that no matter how old a true scabies may be, and whatever strange forms the secondary eruptions arising in the course of the disease may assume, the primary itch-vesicles are never wanting in any circumstances of the case; hence, wherever groups or numbers of pustules break out on the hands and fingers, without any itch-vesicles accompanying them, we may conclude with perfect certainty that the case before us is not a case of scabies but of ecthyma. Otherwise ecthyma may break out on any part of the body; if the frequent contact with irritating substances does not develop it on the hands, its most common locality is the legs. Wherever, however, it is chiefly seated, isolated, stray pustules show themselves at the same time on more remote parts, especially on the abdomen, back and nape of the neck, and sometimes one pustule on the mammæ. For the last eighteen years that I have had fuller opportunities of studying this exanthem which is not by any means of rare occurrence, but whose true character is often misapprehended, and which is very frequently mistaken for some other eruption, I have, according to circumstances, cured it with tolerable promptitude by means of *Sulph.*, *Caust.* or *Sep.*, and sometimes, if a good deal of burning was complained of, with *Ars.* *Merc.*, *Thuja*, *Lyc.*, *Silic.*, *Tart. emet.* and *Rhus t.*, which are suggested by the resemblance of ecthyma-pustules to boils and vaccine-pustules, and which I have tried with great perseverance in the treatment of this exanthem, are scarcely of any effect whatever. *Merc.*, it is true, promotes the process of desiccation, but does not prevent the subsequent and speedy breaking out of new pustules, which sometimes are more troublesome than the former.

9. **Rhypia** or **rupia,** ulcerated phagedænic blister of Hahnemann.—This is distinguished from ecthyma by the fact that it does not consist of pustules, but of a **blister** raised on a dingy-red spot, and sometimes not dissimilar to a small shell. The fluid it contains soon becomes turbid, and changes to a scurf; or, if the scurf is detached prematurely, an obstinate ulcer may be the result. Hahnemann who had seen them in this stage, designated them as phagedænic blisters; that he understood by this term the simple rupia, is evident from the fact that the remedies which he has recommended for these phagedænic blisters, such as *Sep.*, *Ars.*, *Graph.* and *Petrol.*, and above all *Silic.*, have likewise proved

most efficient for rhypia. As regards the rhypia prominens, it is always of a syphilitic nature and does not belong in the present category.

10. **Pompholix** and **pemphigus.**—Both are, like rhypia, exanthems that commence with blisters which start up over night upon a previously-burning painful spot, and resemble blisters caused by burns. According as the locality where these blisters are seated, presents a more or less extensive surface, the blisters may only be of the size of a pea, or the fluid which they contain, may be copious enough to fill a cup (on the trunk, chest, back, abdomen etc.) If only one blister starts up, it constitutes **pompholix**; if several start up, **pemphigus.** The resemblance of these blisters to those caused by burns, led me at an early period to the use of *Caust.*, *Arsen.* and *Canthar.*, with all three of which, but especially with *Caust.*, I have achieved many beautiful and rapid cures, likewise with *Lyc.* and *Rhus*, which I now prefer to any other remedy in this disease.

11. **Herpes, tetters.**—For **herpes phlyctænoides,** I have found the following remedies the most effective, *Rhus t.; Sulph., Ars., Staphys., Sep., Graph.;* for **herpes circinnatus,** *Sep.* and *Sulph.;* for **herpes labialis,** *Bell., Ars., Rhus t., Graph., Sulph., Calc., Hepar, Silic.;* for **herpes præputialis** and **pudendorum,** neither *Dulc.* nor *Petrol.*, but *Sep., Sulph.* and *Nitr. ac.*, whether the herpes is situated on the inner or outer side of the prepuce, or labia; *Merc.* sometimes aggravates the symptoms without doing any good. For **herpes tonsurans,** *Phosph.* and *Graph.*

## 2. Dry Chronic Eruptions.

1. **Maculæ, Spots.**—For hepatic spots the following remedies have so far proved the most effective, *Sulph., Lyc., Ant. cr., Phosph., Sep., Carbo veg.* and *Rhus t.;* for red **spots** on the **abdomen,** *Phosph., Nitr. ac.*

2. **Pityriasis.**—For this form of herpes, which scales off like bran, I have derived the most assistance from *Bry., Sulph., Calc., Ars., Graph., Dulc.* and *Kali carb.*

3. **Psoriasis.**—Wherever this tetter made its appearance, I have found the following remedies the most effective for it, *Phosph.*, *Lyc.*, *Sulph.*, *Rhus t.*, *Nitr. ac.*, *Calc.*, *Petrol.*, *Sep.*, and, in the case of psoriasis **palmaris**, *Phosph.*, *Sep.*, *Lyc.*, *Petrol.*

4. **Prurigo.**—For the itching of the skin, without any visible, or almost microscopic eruption, *Acon.* and *Sulph.* are the best remedies, and sometimes *Merc.*, *Carbo veg.* or *Baryt.* For itching of the **anus**, *Sulph.*, *Sep.*, *Nitr. ac.*, *Merc.*, *Thuja.;* for itching of the **scrotum**, *Sulph.*, *Petrol.*, *Nitr. ac.*, *Dulc.;* of the **pudendum**, *Sep.*, *Sulph.*, *Calc.*, *Silic.*, *Carbo veg.*, *Con.*, *Natr. mur.*

5. **Lichen.**—The febrile form of this eruption is frequently controlled by *Acon.*, *Bell.*, *Bry.;* for the **malignant** lichen, I recommend *Sulph.*, *Calc.*, *Graph.*, *Ars.*, *Rhus t.*

5. **Strophulus.**—This eruption does not require any specific treatment, since it generally passes off again of itself; if any treatment should be required, *Sulph.* generally helps very speedily.

### 3. Special kinds of Scald-head and Herpes.

1. **Favus, malignant scald-head.**—Whatever may be said against the possibility of curing favus by internal remedies alone, I have treated too many cases, where these fungi were cured by internal remedies alone not only on the hairy scalp, but likewise on the arms, for instance in the case of a girl thirteen years old, more particularly by means of *Sulph.*, *Calc.*, *Rhus t.* and *Arsen.*

2. **Moist tinea.**—For this impetiginous product not only *Sulph.*, *Calc.*, *Rhus t.* and *Arsen.*, but likewise *Baryt.*, *Lyc.*, *Sep.*, *Amm. carb.* and *Silic.*, have proved useful.

3. **Eczematous tinea,** *tinea amiantacea* or *asbestacea*—The remedies for this eczema of the hairy scalp are *Merc.*, and very frequently *Dulc.* and *Mez.*

4. **Pityriasis capitis.**—The numerous bran-shaped scales

on the hairy scalp are most frequently cured by means of *Bry.*, *Sulph.*, *Calc.*, *Kali carb.*, *Arsen.*, *Alum.*

5. **Psoriasis capitis.**—The best remedies are *Phosph.*, *Lyc.*, *Sulph.*, *Calc.*, *Nitr. ac.*

6. **Crusta lactea.**—This is most frequently and most rapidly cured by means of *Sulph.*, *Calc.*, *Rhus t.* or *Ars.*

7. **Crusta serpiginosa,** see 1, No. 3.

8. **Mentagra,** see 1, No. 6.

9. **Acne rosacea,** see 1, No. 5.

10. Herpes **labialis,** see Herpes 1, No. 11.

11. Herpes **pudendorum,** ibidem.

12. **Rhypia,** see 1, No. 9.

13. Herpes **circinnatus,** see Herpes 1, No. 11.

14. **Liver-spots,** see Maculæ, 2, No. 1.

15. **Prurigo,** itching at the anus, see 2, No. 4.

16. Prurigo **pudendorum,** itching of the pudenda, see ibidem.

## CHAPTER XXIX.

### BOILS, CARBUNCLES, ABSCESSES AND ULCERS.

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1. **Abscesses.**—If it were in all cases as easy to select a remedy as it is to select the right remedy for inflammatory swellings and abscesses, the whole of Homœopathy might indeed be learned in three hours as the Allopaths sneeringly assert. If there is still hope of scattering these boils and tumors, *Bry.* greatly moderates the inflammation, if they exhibit any inflammatory redness; and *Bell.*, if the inflammation proceeds in the form of rays, and has an erysipelatous character; if the inflammation is moderate and not very painful at first, *Silic.*, *Hep.* and sometimes even *Caust.*, promote the dispersion of the swelling even after pus has already begun to form. If the dispersion will not take place, and the swelling does not come to a head, *Merc.* sometimes will bring this result about in less than 24 hours, for which purpose two globules of the 30th attenuation are generally sufficient. If the abscess is discharging, *Silic.* will often speedily control the suppurative process and bring about cicatrization. The same thing may be said of chronic abscesses, where *Silic.* is likewise the chief remedy, although other remedies, such as *Sulph.*, *Calc.*, *Phosph.*, *Lyc.*, *Laches.*, and *Phosph. ac.*, will likewise often come into play, for all such chronic abscesses, however, I always return to *Silic.* In a case of psoas-abscess which, when I took charge of it, had already been going on for three years, with fistulous openings, I gave during the first week three doses of *Silic.* 30th two globules at each dose, which produced a perceptively-progressing improvement for upwards of six weeks, after which it ceased and did not even take a fresh start after renewed doses of *Silic.* I now gave *Sulph.*, which again improved the case somewhat, but the improvement likewise soon ceased to progress. I now again repeated *Silic.*, but with much less success than before; *Calc.*, *Lyc.* and *Phosph.*, each promoted the cure to some extent without, however, closing the abscess.

Another dose of *Silic.* again started a fresh improvement which terminated in complete cicatrization within three weeks. Even if such abscesses become gangrenous, *Silic.* likewise helps; but if this gangrenous metamorphosis manifests itself, before the abscess breaks, by a dark blue-violet redness of the swelling, *Laches.* is more suitable, and if this change takes place after the breaking of the abscess, while the suppurative process is going on, *Arsen.* is preferable which, in such a case, had better be given in form of a watery solution, a teaspoonful every two or three hours. In indurations of the cellular tissue and the swellings arising from them, *Bry.*, in form of a watery solution, is a remedy that has rendered me eminent service, no matter where these swellings were located. After suppuration has set in, *Silic.* undoubtedly remains the chief remedy; if it does not heal the sore entirely, *Carbo veg.* and *Lyc.* will be found efficient intercurrent remedies.

2. **Chilblains.**—If people are attacked with chilblains by the least snap of cold weather, *Phosph.* 30th, two globules, if administered as soon as the chilblains make their appearance, often helps. If the chilblains have a **bluish-red** or bluish appearance, *Bell.*, *Puls.*, *Sulph.*, or *Kali carb.*, are useful remedies; for **bright-red** chilblains *Nux vom.*, *Cyclam.*, *Lyc.*; if very **painful,** *Bell.*, *Puls.*, *Petrol.*, *Ars.*, *Cham.*, *Nitri. ac.*, *Sulph.*, *Puls.*; if **inflamed,** *Cham.*, *Arsen.*, *Sulph.*, *Puls.*; if **gangrenous,** *Bell.*, *Ars.*, *Laches.*, *Silic.*; if **ulcerated,** *Cham.*, *Ars.*, *Puls.*, *Sulph.*, *Carbo veg.*, *Petrol.* If the part had been completely frozen, and the frost had been thawed out again by snow, the subsequent redness is very often and very speedily relieved by moistening it with the watery, not alcoholic, third attenuation of *Canthar.*, although the internal use of *Nitri. ac.* and *Caust.*, has likewise proved very efficient; likewise *Ars.* and *Carbo veg.* for the subsequent pains; if gangrene supervenes, *Laches.* and *Ars.*, and even *Silic.* may be found efficient remedies; and if the toes are the frozen part, *Sec.*

3. **Boils and Carbuncles.**—For simple boils the best remedy is *Arn.*, in watery solution, a teaspoonful every three hours; if dispersion is no longer possible, this proceeding will soon bring them to a head, after which, if suppuration has once set in, *Sulph.* will speedily bring about the expulsion of the core and the healing of the sore. If several small boils unite into a big

one, *Nux vom.* is the most efficient remedy, after which, if suppuration sets in, *Hepar.* will be found most suitable. If, after the expulsion of the core, the cavities do not close, but continue to suppurate, *Silic.* will heal the sore most reliably and speedily. If the boils continue to break out, *Lyc.* helps most generally, and sometimes *Nux vom.* The treatment of **carbuncle** presents greater difficulties, even if it is not gangrenous, but a simple carbuncle resembling a big boil or malignant furuncle. Gangrene does not always supervene as a matter of course, although, even after one carbuncle is fully ripe, a purulent ichor is sometimes secreted, the swelling remaining hard all the time; a common benign furuncle never behaves in this manner. The great difficulty in the treatment of carbuncle is to break the disease at the onset, and to bring about suppuration as soon as possible. This change may be delayed two or three weeks, during which period the inflammatory swelling continues to increase in size, and the patients have to endure the most excruciating tensive pains which deprive them of all sleep. All treatment with *Arnica*, *Nux vom.*, or *Silic.*, has always been fruitless in my hands, and the swelling continued to increase two or three weeks unceasingly, precisely as it would have done if no medicine at all had been used. *Ars.* and *Laches.*, exhibited during the inflammatory stage, had no better effect. In a few cases *Bell.* seemed to moderate the pains and inflammation, and I seemed absolutely without means for some time to hasten the period when such a malignant furuncle would suppurate, until I bethought myself of *Bry.*, which hastened the process of suppuration, sometimes reducing the period to five or six days; in two cases, where I was called at the commencement, I was even enabled to effect the dispersion of the tumor. If *Bry.* has caused the tumor to discharge and the action of this medicine seems exhausted; I then resort to *Rhus t.*, which often completes the cure in 8 to 10 days; if the malignant furuncle, after previous Allopathic treatment secretes a badly-colored ichor, I give *Silic.* with the best success. I need scarcely say that if the furuncle threatens to become gangrenous, and *Silic.* is not sufficient, *Laches.* and *Ars.* are the most effective remedies.

4. **Anthrax, pustula maligna.**—No where we meet with a more distressing confusion of medical terms than in this disorder. Among different nations the terms *anthrax*, *carbuncle*,

*pustula gangrenosa* etc. have the most diversified meaning. To illustrate: **anthrax,** among the Germans, designates gangrene of the spleen, with its pustules, whereas, among the French, by the same term is understood the previously-described malignant furuncle or benign carbuncle. **Carbuncle,** among the Germans, without any special attribute, means a **malignant furuncle;** among the French it signifies the real **pustula** gangrænosa, to which, if they want to designate gangrene of the spleen, they add the term "contagiosus." In order to clear up this confusion of terms, I have uniformly applied the term "anthrax" to the contagious pustula maligna arising from gangrene of the spleen, and the term **"carbuncle"** to malignant furuncles, but never to the true anthrax, which I include in the designation of non-contagious pustula gangrænosa. In reality there are only four easily-distinguished forms among the above-mentioned class of phenomena: *a*, **simple** or **common furuncle,** non-gangrenous, **boil,** and **malignant furuncle,** the **simple carbuncle,** and *b*, the **pustula gangrænosa,** sometimes termed **malignant** or **gangrenous carbuncles,** and the **contagious pustula gangrænosa,** or **gangrene of the spleen.** For these **contagious gangrenous pustules,** to which alone reference is made here, *Ars.* is the chief remedy, whether the pustules are contagious or not, and whether they have arisen from gangrene of the spleen or other causes. I prefer it in most cases to the very unreliable action of *Anthracin.* I once had occasion to treat two farmers who, while flaying a cow that had died of gangrene of the spleen, had become infected with the poison by cutting themselves. One had *Anthracin* given him and the other *Ars.*, the former changing the wound to a clean ulcer in 24 hours and the *Ars.* in 36 hours. This difference may of course have been founded in constitutional peculiarities as well as in inherent differences of degree in the curative powers of the two drugs. In gangrene of any form, especially if the affected part begins to look black, *Ars.* is always the main remedy, which, if the cure should not proceed with satisfactory rapidity, may be superseded by an occasional dose of *China* which may be allowed to act for 24 to 48 hours with great advantage. Nevertheless *Ars.* will always have to be resumed to complete the cure. Even in the gangrene of old people, which generally commences at the toes, *Ars.* does a great deal more than the much vaunted *Sec. corn.* which has never shown the least effect in any of my cases of this kind, whereas *Ars.* cured this gangrene in the case of an old man

three times in succession, as soon as the disorder first showed itself. It is only if simple inflammatory swellings threaten to become gangrenous by assuming a blue or bluish-red color, that *Bell.*, *Laches.*, *Rhus t.* and *Silic.* are often preferable to *Ars.* What this last-mentioned remedy is capable of accomplishing in fully-developed gangrene has been shown me in the case of a patient who, from other causes, was hastening towards an inevitable death, and whom I treated together with Doctor Von Bœnninghousen Jr., residing in this city. Having been laid up for years with suppuration of the hip-joint, with three fistulous openings discharging in the inguinal region and in the scrotum, for which nothing could be done by any treatment, this patient, who had been confined to his bed for years, had become so reduced in strength that a general marasmus with hectic fever set in and his life could only be prolonged by artificial means, so far as we were able to control the untoward symptoms which every now and then showed themselves during his sickness. At the same time the patient grew weaker from day to day, and his pulse was like a mere thread. One morning, struck by the odor of mortification which enveloped the patient, we examined the sore which we had omitted to do for the last three days, and discovered a rapidly-progressing gangrenous destruction. *Ars.* 30th, in form of a watery solution, visibly relieved the patient within three days, arrested the gangrenous destruction and caused several portions of gangrened tissue to slough off. Three days after, the patient died after having been pulseless for 36 hours.

5. **Simple ulcers.**—Superficial suppurations arising from wounds, inflammatory swellings and abscesses, if no chronic dyscrasia is at the bottom of the trouble, yield in most cases not only to *Silic.*, but likewise to *Laches.* or *Hep. sulph.* The case is different in regard to chronic ulcers and suppurations, whether proceeding from simple inflammatory wounds or abscesses, or developed spontaneously, like ulcers of the feet. In such cases, no matter where such ulcers may be located, on the trunk, neck, nape of the neck, arms, legs, feet, toes, hands or fingers, I commence my treatment, of course in the absence of all syphilitic taint, with *Sulph.*, giving two to three doses and allowing each dose to act from four to five weeks, after which I give *Calc.*, *Silic.* or *Ars.*, according as they may be required by the circumstances

of the case; by this means I have effected within a short period the cicatrization of many obstinate wounds and ulcers. Whatever *Sulph.* may be capable of accomplishing in these cases, I have for a long time past, commenced their treatment with no other remedy than *Sulph.* Experience has shown me that, unless the treatment of such cases is initiated by *Sulph.*, the cure is very often delayed and even the most appropriate remedies remain without effect until we give a dose of *Sulph.*, after which these same remedies act with surprising efficacy and promptitude. For **herpetic** ulcers, surrounded by pimples and pustules, I give *Laches.*, *Sulph.*, *Phosph. ac.*, *Ars.*, *Graph.*, *Carbo veg.;* for **arthritic** ulcers, *Sulph.*, *Calc.*, *Lyc.*, *Bry.*, *Rhus t.;* **scorbutic,** *Carbo veg.*, *Sulph.*, *Ars.*, *Merc.*, *Laches.*, *Silic.;* **mercurial,** arising from the abuse of Mercury, *Hep.*, *Aur.*, *Laches.*, *Silic.*, *Kali hydr.;* **varicose** ulcers, *Sulph.*, *Puls.*, *Laches.*, *Ars.*, *Sil.*, *Calc.;* **phagedænic** ulcers, *Sulph.*, *Nitr. ac.*, *Caust.*, *Carbo veg.*, *Ars.*, *Lyc.*, *Silic.;* **fistulous** ulcers, *Silic.* first, after which, *Calc.*, *Lyc.*, *Phosph.*, *Sulph.*, *Carbo veg.*, *Caust.;* ulcers breaking out around a **wart,** *Ars.*, *Caust.*, *Ant. cr.;* very much **inflamed** ulcers, *Sulph.*, *Laches.*, *Silic.*, *Lyc.;* **swollen** ulcers, *Sulph.*, *Silic.*, *Rhus t.*, *Lyc.*, *Sep.;* **flat,** superficial ulcers, *Sulph.*, *Ars.*, *Lyc.*, *Carbo veg.*, *Phosph. ac.;* **deeply** penetrating ulcers, *Sil.*, *Sulph.*, *Arsen.*, *Calc.*, *Rhus t.*, *Laches.;* ulcers with **raised** borders, *Sulph.*, *Calc.*, *Silic.*, *Laches.*, *Lyc.*, *Rhus t.*, *Arsen.;* ulcers with **callous** edges, *Sulph.*, *Calc.*, *Silic.*, *Ars.*, *Lyc.;* ulcers with bluish-redness round about, *Sulph.*, *Laches.*, *Silic.*, *Carbo veg.;* with indented borders and base, *Phosph. ac.*, *Silic.;* with **unclean** base, *Sulph.*, *Calc.*, *Lyc.*, *Silic.*, *Arsen.;* with **blackish** bottom owing to gangrenous sloughing of the cellular tissue, *Ars.*, *Laches.*, *Silic.*, *Lyc.;* **fetid** ulcers, *Carbo veg.*, *Laches.*, *Ars.*, *Sulph.*, *Lyc.*, *Silic.;* readily **bleeding,** *Phosph.*, *Laches.*, *Sulph.*, *Ars.*, *Carbo veg.*, *Lyc.*, *Silic.*, *Hep.;* with **proud flesh,** *Silic.*, *Petrol.*, *Sulph.*, *Graph.*, *Ars.;* discharging a thin, **purulent ichor,** *Silic.*, *Sulph.*, *Ars.*, *Carbo veg.*, *Laches.*, *Lyc.;* with **thick,** yellow pus, *Sulph.*, *Calc.*, *Silic.*, *Hep.;* **burning pains** in the ulcers, *Ars.*, *Carbo veg.*, *Sulph.*, *Silic.*, *Rhus t.;* itching around the ulcers, *Sulph.*, *Ars.*, *Hep.*, *Lyc.*, *Graph.*, *Carbo veg.*, *Laches.*, *Rhus t.;* **stinging** pains, *Ars.*, *Sulph.*, *Silic.*, *Puls.*, *Petrol.*, *Lyc.;* **throbbing** pains, *Sulph.*, *Silic.*, *Calc.*, *Lyc.;* ulcers on the **legs** and **feet,** especially, *Sulph.*, *Ars.*, *Calc.*, *Laches.*, *Graph.*, *Lyc.*, *Silic.*, *Carbo veg.;* on the **hands, fingers** and **toes,** *Sep.*, *Silic.*, *Caust.*, *Sulph.*

6. **Carcinomatous cutaneous ulcers.**—Of all carcinomatous disorganizations, cancer of the skin is most easily cured, whether it breaks out on the nose, lips, cheeks or in any other part. *Arsen.* is the most effective remedy, although *Silic.*, *Con.*, *Laches.*, *Sulph.*, and even *Phosph.*, *Caust.*, *Calc.*, *Lyc.* and *Sep.* may likewise have to be resorted to. More recently I commence the treatment of carcinomatous ulcers of the nose, lips and cheeks with *Sulph.* and *Calc.;* after these remedies have improved the case, I complete the cure with *Ars.* and *Silic.*, especially in cancer of the lips. If these remedies do not improve the case, *Con.*, *Caust.* or *Laches.*, and likewise *Phosph.* and *Lyc.* advance the cure so as to give *Ars.* a chance to complete it. *Arsen.* is particularly efficacious after *Calc.* or *Lyc.;* *Silic.* after *Lyc.*, *Con.* and *Caust.*, and *Sep.* after *Silic.* and *Ars.*

7. **Soreness** and **unhealthiness** of the skin.—*Lyc.*, which is so frequently used as a powder in the case of children, has no effect internally, certainly no such effect as *Cham.*, *Ignat.*, *Rhus t.* and *Merc.* in recent cases, and in chronic cases *Sulph.*, *Calc.*, *Silic.* and *Carbo veg.* For **soreness** of the hairy scalp, *Calc.*, *Lyc.*, *Silic.*, not only help in the case of children, but likewise in that of adults; behind or on the **ears**, *Calc.*, *Graph.*, *Lyc.*, *Oleand.*, *Petrol.*, *Laches.*, *Merc.;* in the **canthi**, *Ant. cr.*, *Sulph.*, *Silic.;* on the **nose**, *Alum.*, *Graph.*, *Kali carb.*, *Magnes. mur.*, *Nitr. ac.;* **of the lips** and **corners of the mouth**, *Phosph.*, *Sep.*, *Silic.;* of the **umbilicus**, *Sulph.*, *Silic.;* between the **nates**, *Carbo.veg.*, *Caust.*, *Graph.*, *Sulph.;* around the **sexual organs**, *Carbo veg.*, *Graph.*, *Lyc.*, *Nux vom.*, *Sep.*, *Sulph.;* of the **prepuce**, frequently, *Silic.;* of the **scrotum**, *Sulph.*, *Petrol.*, *Carbo veg.;* of the **pudendum**, *Carbo veg.*, *Sep.*, *Sulph.;* of the **nipples** of the **mammæ**, *Cham.*, *Graph.*, *Sep.*, *Silic.*, *Calc.*, *Caust.;* of the **axillæ**, *Carbo veg.*, *Arsen.*, *Silic.;* between the **toes**, *Graph.*, *Sulph.*, *Silic.;* if the skin is unhealthy, and recent injuries of the skin are not disposed to heal or if they ulcerate, *Cham.*, *Hepar* and *Silic.* often help, but if we desire to heal this trouble radically, it can only be accomplished by means of *Sulph.*, *Calc.*, *Carbo veg.*, *Graph.*, and *Petrol.*, each remedy to be given at long intervals.

8. **Rhagades.**—The rhagades of persons who work a great deal in water, are mostly healed by *Sulph.*, *Calc.* or *Rhus t.;* rhagades arising in the cold of winter, by *Petrol.* or *Sulph.;* rha-

gades at the **anus**, by *Sulph.*, *Rhus t.* or *Graph.;* of the **lips** and **corners** of the **mouth**, by *Ignat.*, *Sulph.*, *Merc.;* of the **corners** of the **nose**, *Silic.*, *Merc.;* of the **prepuce**, *Silic.*, *Sep.*, *Merc.;* **bleeding**, *Sulph.*, *Merc.*, *Petrol.*, *Silic.;* **ulcerated** rhagades, *Silic.*, *Merc.*, *Cham.*

9. **Fungoid tumors, fungi.**—So far I have treated three cases of **fungus hæmatodes** [? H.], the patients being children from 5 to 10 years old. The fungi grew out of congenital claret-colored spots, in one, on the forehead; in another, on the temple; and in the third, on the eyelid. *Phosph.* 30th, two globules in a few spoonfuls of water, of which solution a teaspoonful was given morning and evening, removed the disorder perfectly in two to three weeks.

10. **Sarcoma, steatomatous tumors.**— I have cured several steatomata of the hairy scalp and face with *Sulph.*, *Calc.* and *Nitr. ac.;* others have remained uncured, for what special reason I am unable to decide. As regards sarcomata, I have never yet found them amenable to treatment.

11. **Cancroids.**—I have seen only one case of this peculiar hypertrophy of the skin. This swelling is most commonly shaped like crabs, and was formerly reckoned among carcinomatous products, whereas it really constitutes a form of **lupus**. My patient was a noted French author who had such a swelling under the right eyelid. *Sulph.*, *Calc.* and *Silic.* improved the case very much. But my friend, who wished to go to London, where he expected to get married, found the cure too slow; and, although I had dissuaded him most strenuously from submitting to an operation, yet being assured by a young surgeon that the operation was a mere trifle, perfectly harmless, and could be performed in less than two minutes without entailing any untoward consequences, he had the tumor extirpated. Twenty-four hours after the operation a violent erysipelas of the face broke out, of which the patient died in three days, even before I was informed of what had taken place.

## CHAPTER XXX.

## AFFECTIONS OF VARIOUS PARTS OF THE SKIN, OF THE HAIR AND NAILS.

1. **Moles, nævi materni, aneurysms by anastomosis.**—These are of various kinds, some being exceedingly harmless, others of very serious importance. The harmless moles are simple spots consisting of an excessive accumulation of pigment under the skin. The other class, aneurysms by anastomosis, appear sometimes as claret-colored spots, and sometimes as vegetations, raised swellings or varicose growths; they are always of a serious character, because they may easily give rise to fungus hæmatodes, as has been shown in Chap. II. No. 7. The former need not trouble us, but the latter have to be attended to as soon as possible; in their case *Sulph.*, *Calc.*, *Phosph.*, *Rhus t.*, and sometimes *Carbo veg.*, *Silic.* and *Plat.*, at long intervals, will afford help.

2. **Warts, wens** and **horny Excrescences.**—Warts are something very peculiar. Some, especially, if they are numerous, sometimes heal very rapidly, whereas others, isolated warts, sometimes bid defiance to all treatment. So far I have been most successful with *Dulc.*, *Calc.*, *Caust.*, *Thuja* and *Sep.*, and sometimes with *Lyc.*, *Rhus t.* and *Sulph.* The locality, where the warts are seated, makes very little difference; with the same remedy I have healed warts seated in the most different localities, although warts on the hands and fingers seem to require principally *Calc.*, *Sep.*, *Rhus t.*, *Dulc.* and *Thuja*, and warts in the face, *Caust.* and *Calc.* Warts growing near the nails, if they are rather of a **fleshy nature,** are almost always cured with *Caust.;* fleshy warts generally disappear principally under the effects of *Caust.*, *Rhus t.* or *Dulc.;* **horny warts** require on the contrary *Calc.*, *Sep.*, *Ant. cr.* and *Thuja;* **pedunculated** warts, above all, *Lyc.* or *Caust.* Warts on the dorsa of the hands or fingers I have cured with *Natr. carb.* and *Dulc.*, and warts on the sides of the fingers with

*Sep.*, *Thuja* and *Calc.* In the case of a lady whose neck was covered with little pedunculated warts, *Lyc.* effected a real miracle; after having disfigured her neck for years they almost disappeared entirely in a fortnight. For warts in the face, *Calc.* and *Caust.*, have done most in my practice; but that, as Rueckert would seem to suggest, *Lyc.* has special reference to the chin, *Calc.* to the arms and neck, and *Thuja* to the nostrils, is not corroborated by my own experience as truly characteristic of these drugs respectively. The main point is the kind of warts, whether they are **fleshy, pedunculate** or **horny**; if the remedy is adapted to these conditions, the warts will disappear. *Caust.* and *Natr. carb.*, and likewise *Calc.* seem to be principally adapted to isolated warts; *Sulph.*, *Dulc.*, *Sep.*, *Thuja*, *Rhus t.*, *Calc.* and *Lyc.* are suitable for many kinds. *Sulph.*, *Sep.* and *Thuja* deserve special attention, if the warts break out on young girls.

3. **Corns.**—Touching them with *Arn.* immediately after paring them, will, if repeated a number of times, and if the person wears sufficiently large boots or shoes, finally remove the corns, as I have frequently witnessed in my own practice. If persons have a sufficient amount of patience, and *Ant. cr.* does not remove the corns, *Calc.* and *Sep.*, and sometimes *Sulph.* will accomplish this result. Sometimes *Lyc.* or *Nitri. ac.* help, especially after *Calc.*, and occasionally *Silic.* after *Lyc.* If the corns are very painful, *Calc.* and *Nitri ac.*, sometimes moderate the pain very rapidly; and if the pains are **stinging**, *Bry.*, *Lyc.*, *Silic.*, or *Sulph.*; if the pains return at every change of the weather, *Silic.* or *Rhus t.* helps; and *Bry.*, if the pain is chiefly felt during a thunderstorm.

4. **Varices.**—*Puls.*, *Carbo veg.* and *Sulph.* are the best remedies [also *Hamam.* H.]; if persons have to stand a great deal, these remedies are ineffectual, and the best such persons can do is to wear elastic stockings or drawers. If the varices **ulcerate**, *Puls.*, *Silic.* and *Sulph.*, help most generally, and sometimes *Laches.*, *Arsen.*, or *Calc.*

5. **Affections of the Hair.**—To what has been stated on this subject at the conclusion of Chapter III. I will here add that *Kali carb.* and *Graph.* sometimes arrest the falling out of the eyebrows, and *Graph.*, *Natr. mur.*, and *Calc.* the falling out of the whiskers.

6. **Affections of the Nails.**—When the nails have a tendency to grow into the flesh, Hering's advice to pare them thin in the middle and afterwards not to trim them off on the side but in front, so that the depression is turned outwards, may do very well as long as the trouble is not too far advanced; but if the nail has grown far into the flesh, it has to be pulled out by means of suitable instruments, after which the wound is to be dressed with a pledget of lint moistened with *Arn.*, and round pieces of gutta percha of the size of a goose-quill are to be applied on each side of the nail under the flesh, and to be kept in place by means of a firmly-pressing ring of gutta percha. By this means the flesh will finally grow over the nail and the wound will heal provided it has a fresh *Arn.* dressing morning and night. If the ulceration has progressed too far, and *Arn.* is no longer sufficient, *Sulph.* and *Silic.* will soon effect the healing of the sore, more particularly if it is dressed with lint dipped in a solution of two pellets of the 30th attenuation of the same medicine that is taken internally. **Soft, pliable** nails require *Graph.* and *Sulph.;* liability of the nails to **split,** *Silic.;* **brittle** nails, *Alum.*, *Silic.;* **thickening** and distortion of the nails, *Graph.*, *Silic.*, *Sulph.;* badly-colored, **yellow** nails, *Sepia.*, *Silic.*, *Sulph.*, *Graph.*, *Nitri. ac.;* **hangnails** continually forming, *Rhus t.*, *Sulph.*, *Calc.*, *Lyc.*

## CHAPTER XXXI.

## EXTERNAL INJURIES.

### Dry Injuries.

1. **Concussions by a fall, blow or shock.**—That the main remedy for these injuries is *Arn.*, is known even to every lay-friend of Homœopathy, and far be it from me to do the least injustice to this excellent drug or to tarnish its well-earned reputation by the least remark. If called immediately after the accident had occurred, I have often cured the most violent concussions of the brain and spinal cord, by means of two pellets of *Arn.* 30th in form of a watery solution, a teaspoonful every two or three hours, within 48 hours. If we are not called at the onset, *Arn.* may still effect a cure without the aid of any other drug; but there are cases where *Arn.* is not sufficient; on such occasions concussion of the brain is met by *Cicuta.*, *Bell.*, *Bry.* and *Phosph.*, and concussion of the spinal cord by *Rhus t.* and *Calc.;* according to circumstances even *Bry.* may be required, more especially after making a wrong step when going upstairs, or after a fall upon the heels when leaping from a considerable height. If after such a concussion a headache remains that will not yield to *Arn.*, *Bry.* may help and likewise *Bell.* If such concussions affect the chest, and stinging pains are felt during the act of respiration, *Bry.* likewise helps in most cases, if *Arn.* is not sufficient; *Bry.* is likewise the main remedy if the concussion causes trouble at the stomach. An almost instantaneous paralysis of the lower extremities, caused by a fall on the buttocks in the case of a young man, from under whom a chair was withdrawn while he was on the point of seating himself, was cured very speedily by a dose of *Rhus t.*

2. **Sprains and Twistings of the Trunk.**—It is well known that in most cases of this kind *Rhus t.* helps; but so does *Bry.*, especially if every movement causes stinging pains in the

back. If a sensation is complained of as if something were loose or hanging down in the bowels, *Nux v.* very often helps, or if great anxiety and restlessness, with nausea are complained of, and volvulus is to be apprehended, *Verat. alb.* Many of the subsequent ailments, more particularly headache, yield to *Calc.*, *Silic.*, *Natr. carb.* and *Phosph. ac.*; **backache,** and pain in the small of the back, to *Sulph.*, *Sep.*, *Bry.*, *Calc.*, *Nux v.*; **liability** to strains is cured by *Calc.*, *Sil.*, *Sep.* and *Natr. carb.*

3. **Sprains, dislocations.**—If a joint is dislocated, the best thing that can be done until the dislocation can be reduced, is to apply compresses with Arnica-water. This prevents the swelling of the part and facilitates the act of reduction. After the dislocation is reduced, the best remedy is *Rhus* 30th, two teaspoonfuls in a few spoonfuls of water, a teaspoonful of which may be taken three times a day, until the pains are entirely subdued. If the joint is simply **sprained,** *Rhus*, taken internally, is likewise the best remedy; *Bry.* may afterwards be given, after the mobility of the limb is perfectly restored and stinging pains are still complained of. For long-lasting subsequent pains in the wrist, *Amm. carb.* may be given, and in the tarsal joint, *Ruta.* This drug likewise removes a subsequently remaining creaking noise in the joint. If a sprain is associated with **swelling** and bluish-redness of the part, *Arn.* has to be resorted to first, which is best given internally until the swelling has disappeared; if the difficulty of moving the joint still remains, *Rhus t.* may then be given.

4. **Contusions.**—*Arn.*, externally and internally, is the main remedy. Externally it should only be employed 12 to 24 hours, no longer. It is true, as Seidel observes in Stapf's Archiv, that the unduly protracted employment of *Arn.* is rather hurtful than useful. In such circumstances I have often seen the improvement stop until I discontinued the external use of *Arn.*, and only gave it internally, when the improvement at once progressed on its course. If erysipelas supervenes during contusions, which is sometimes the case even from the too liberal use of *Arn.*, more particularly if it is applied undiluted, *Rhus t.* is the best remedy for this erysipelas. *Arn.* should never be used undiluted, but always in the form of a watery solution, in the proportion of ten drops of the tincture to half a pint of water. If the contusion

involves injury of the bone, without any fracture, and *Arn.* does not relieve the pain in the bone, *Ruta* 30th is the best remedy internally, and the tincture to be used externally the same as *Arn.* If pains in the interior of the bone still remain in spite of this treatment, *Symphitum officinale* 30th may be resorted to, but only internally. If gangrene threatens to supervene during a contusion, *Laches.* is a sovereign remedy as long as the injured part has a dark violet-red color; if the color is already black, *China* or *Ars.* has to be resorted to. For contusions of glandular parts, such as the lips, breasts etc., if indurations still remain after the use of *Arn.*, *Con.* 30th is an indispensable remedy, of which I give two or three doses during the first week and then await the result without any further repetition.

5. **Fractures.**—What *Symphitum officinale* is capable of accomplishing in fractures towards the more rapid formation of callus, has been evidenced to me in a case that constitutes a real triumph for our art. A boy of sixteen years, belonging to a very respectable family, had fractured the humerus close to the shoulder-joint. The bone was set by a young surgeon of excellent reputation for skill, and connected with the Medical School of Paris in the capacity of private teacher of surgery. In answer to the father's question what he thought of the propriety of resorting to homœopathic treatment during his attendance on the boy, he stated that he had nothing to say about this point, and that his business was to attend to the surgical part of the treatment. Before the bandages were applied, the necessary compresses were moistened with the tincture of Symphitum and three globules of the 30th attenuation were at the same time administered internally in form of a watery solution, of which the patient took a teaspoonful three times a day the first three days, and afterwards only a teaspoonful morning and night. The Doctor promised to return in a fortnight, during which time the *Symphitum* was only continued internally. On his return, and after removing the bandage and examining the arm, he exclaimed in a state of amazement: "If I had not examined the arm before, and had seen the fracture, I should not believe that the bone had ever been broken. I have never seen a bone reunite so rapidly; if I apply another bandage, it is simply for the sake of safety. Let me have your vial of *Symphitum;* I will use this medicine in my own cases, and if I perform a few

more cures like this, I shall turn homœopath, and, instead of practising medicine, devote myself exclusively to surgery." This gentleman is now professor and a celebrated operator, but he has kept his word. Attending exclusively to operations, he treats his cases homœopathically without saying any thing about it, owing to his position in the faculty; but he favors the homœopaths in every possible manner, so that it is a real pleasure for one of us to consult with him.

## 2. Bloody Injuries.

1. **Contused wounds.**—In contused wounds, where the skin alone has been torn, *Arn.*, used internally and externally, as stated in No. 1, 4, is likewise sufficient. If whole pieces of flesh are torn off, *Calendula* helps, as I can state from personal experience, much more rapidly and reliably than *Arn.;* only the external use must not be continued too long. Even in gun-shot wounds, where the whole limb is shattered *Calendula* is indispensable. During the coup d'état of 1849, I treated several cases of this kind, with my colleague Croserio, among my most intimate friends. In treating the wounded with *Arn.* we had already lost two of pyæmia, who would rather die than have their limbs amputated; after reading Dr. Thorer's observations in Stapf's new Archiv, Vol. III. No. 1, we used *Calendula* from this time forward. The result was exceedingly brilliant. In the case of a young man whose upper arm was entirely crushed, and who was unwilling to have the limb amputated, the continued use of *Calendula* enabled us to extract all the bony splinters without any suppuration setting in; the arm healed with dry granulations, and although somewhat distorted, yet the limb preserved a tolerable shape and the patient's life was not sacrificed. This was the result in every case where the splinters had to be cut out and the soft parts had been horribly contused and lacerated. In all such cases *Calendula* is indispensable to prevent suppuration and will always prove more efficient than any other remedy.

2. **Excoriations.**—What Seidel observes in Stapf's Archiv, Vol. XII. No. 1, concerning the curative virtues of *Sulph. ac.*, meets my most cordial approval. Wherever the skin is excoria-

ted, by riding on horseback or from any other cause, the sore is generally speedily healed by moistening it with a solution of one drop of concentrated *Sulphuric acid* in half a pint of water, well stirred and shaken. The part may likewise be painted with Collodion. The application of a solution of *Sulph. ac.* to bed-sores is likewise very beneficial. If the sores become gangrenous, *China* or *Arsen.* may prove very useful. [The *Tannate of Lead* ointment is an excellent application to bed-sores. H.]

3. **Stab and Cut-wounds.**—Not only for the more trifling pricks with needles or awls, but likewise for more severe cuts, with swords etc., *Hypericum perfoliatum* is a distinguished remedy, although, in contusions and lacerations, it is inferior to *Arn.* and *Calendula.* What has been said of *Staphys.* for cut-wounds, is really only applicable to wounds inflicted with very sharp instruments, such as surgical instruments, razors etc., and having penetrated the flesh very deeply. Hence it can only be used to advantage after simple and rapidly-performed operations; whereas *Arn.*, and still more *Calendula*, are preferable for all wounds in whose interior a good deal of work has to be done by the fingers and whose sides are consequently drawn more or less apart. If splinters have been stuck into the flesh so far that they cannot be reached and cannot be pulled out, a single dose of *Hep. sulph.* is often sufficient to bring on suppuration over night, and the spontaneous expulsion of the splinter.

4. **Poisoned wounds.**—I have not yet had an opportunity of treating the bites of mad dogs or poisonous vipers. A farmer informed me some time ago that he was bitten by a viper which had hidden itself in a bundle of dry brush-wood in the kitchen. He did not know that it was a viper until he saw the animal crawl out of the bundle. As soon as he found that he had been poisoned by a serpent he held the finger as near the fire as he could bear it, according to Hering's advice; for, being a passionate hunter, he always carried a copy of his book with him. Almost immediately after the bite had been inflicted, he felt a disagreeable sensation pervade his whole body, and a still more disagreeable sensation proceeded from the spot where the bite had been inflicted, towards the heart. The longer he exposed his hand to the fire, the more plainly he felt that this disagreeable sensation receded

from the heart towards the bitten spot which became less swollen in proportion as the disagreeable sensation diminished; it finally seemed to leave him again by that spot. After this proceeding was ended he took a dose of *Laches.*, and felt no further untoward symptoms. If the poison of glanders touches a sore on the groom's hand, *Ars.* is a sure remedy; it is likewise a remedy for dissection wounds. For the sting of bees and wasps the best remedy is *Apis* 30th, and sometimes *Merc.* and *Laches.;* for subsequently-remaining unpleasant consequences, *Terebinth.* 30th may be given. The poison of **mosquito-bites** is neutralized by washing the part with *Arn.* water. [The *water of Ammonia* is a most excellent application to mosquito-bites, bee-stings, etc. H.]

### 3. Accidents accompanying Wounds.

1. **Hæmorrhages.**—Where the hæmorrhages are caused by the wounding of large blood-vessels, the flow of blood can only be stopped by the compression or ligation of the vessels. Slight hæmorrhages cease of themselves as soon as the wound is dressed with dressings soaked with Arnica-water; *Arn.* itself being a very excellent hæmostatic agent. Nevertheless there are persons in whom the most trifling prick in the finger causes an unceasing flow of blood. If *Arn.*, applied externally to the wound in form of pure tincture, and the simultaneous use of two globules of the 30th attenuation in a few spoonfuls of water, does not stop the hæmorrhage, and *Ipec.* likewise remains ineffectual, *Phosph.* and sometimes *Ars.* will afford the desired relief. [*Cobweb* and very small pieces of sponge pressed on the wound, are excellent means of arresting the flow of blood. H.] The fainting and debility remaining after great injuries, are relieved by *China*, and, if this is not sufficient, by *Ipec.* and sometimes even *Verat. alb.*

2. **Inflammation** of the **injured parts.**—If a wound is badly managed, irritated anew, or treated to excess with undiluted tincture of Arnica, erysipelas is very apt to supervene and the last mischief is sometimes worse than the first. Operations in the heat of summer, and other great injuries sometimes become associated with erysipelas; there are periods when our hospital-surgeons decline to operate, because most of those operated on, die of

erysipelas. Under proper homœopathic treatment erysipelas or inflammation of the affected parts need not occur, for the reason that the cautious use of *Arn.* counteracts every tendency to inflammation from the beginning. But since the physician cannot always prevent the absurd conduct of the patient or his family, erysipelas may set in in spite of the greatest care and precautions on the part of the medical attendant. This kind of erysipelas has always been successfully cured by me with *Rhus* 30th, administered internally.

3. **Wound-fever.**—This fever is likewise of much less frequent occurrence under homœopathic than under allopathic treatment; if it does occur, it very soon yields to the continued internal use of *Arn.*, or, if more special remedies are required, to *Acon.* or *Coff.*

4. **Traumatic Tetanus.**—I have only treated one case of traumatic tetanus together with my colleague, Dr. Croserio. The patient had been severely wounded in the Insurrection of June, 1832. *Angustura* 30th, three globules in a few spoonfuls of water, of which a teaspoonful was given every half hour, soon controlled the convulsions.

5. **Pyæmia.**—After having lost one of our wounded patients by this terrible accident, where pus is taken up by the absorbents and transferred to the general current of the circulation; and having learned by this sad experience that *Rhus t.* and *Ars.* are utterly powerless in this condition of things, we, that is, Dr. Croserio and myself, determined on the first appearance of the symptoms of pyæmia in any subsequent case (violent chill, with sudden decrease or even entire suspension of the secretion of pus), to at once resort to *Puls.* This remedy, indeed, appeared to have some effect; the chill during which the remedy was administered to the second of our patients, ceased at once, and, under the continued use of *Puls.*, he felt tolerably well on the day following, although the suppuration had not yet returned in the same degree as before. *Puls.* was continued, but another chill set in during the night, the flow of pus had entirely ceased and on the following day we found our patient in a completely typhoid condition, for which nothing could be done and to which he succumbed on the third day. In

the mean while we became acquainted with Thorer's report on the curative virtues of Calendula; by using this drug we prevented suppuration and saved all our wounded.

6. **Wounds indisposed to cicatrize.**—If, in spite of treatment, wounds do not close, but ulcerate in the place of it, or continue to discharge pus, I generally give first a dose of *Sulph.*, with which I very often accomplish my purpose, especially if the pus itself is a laudable pus; if *Sulph.* does not help, *Calc.* often does; if the pus is badly-colored and of a malignant character, I give *Silic.;* if this does not help, I give *Sulph.* and *Calc.*, after which, if the wound is not yet entirely healed, another dose of *Silic.* removes the last remnants of diseased action, or, if *Silic.* should fail us, *Hep. sulph.* will certainly accomplish this result.

## 4. Burns.

A beginner in Homœopathy, after reading of the various means recommended for burns, is no better advised at the end than he was at the beginning. He is undecided whether he had better resort to *Caust.* or *Canthar.*, to soap or to cotton, to the tincture of Urtica urens or to lime water, etc. It is true that all these means are useful, but each in its place. *Arn.* is of less use than any of them, unless the strong tincture or the alcoholic attenuations are applied, in which case it is the alcohol and not the *Arn.* that heals the burn. In treating burns I generally pursue the following course: If the burnt part can readily be plunged into a vessel, such as the hands and fingers, feet and toes, I cause the part to be dipped into a vessel with heated alcohol and to be kept there until all pain is gone; if the pain returns, after drawing the burnt part out, I have it again inserted into the alcohol; this proceeding is repeated until no pain is any more felt, which it generally takes from 15 to 20 minutes to accomplish, provided the operation is commenced as soon as the accident happens. If this is not the case, or if the part cannot be kept in the alcohol, I apply a *soap-poultice* as warm as can be borne. In one case, where a boy had burnt his whole face by firing off powder, the burn was healed completely with such a soap-poultice from evening till morning. I likewise resort to a soap-poultice if the burn has penetrated to the deeper layers

of tissue, or if suppuration has set in, and I very often accomplish my purpose with it in a very short time. To blisters in cases of superficial burns I apply externally the alcoholic tincture of *Canthar.* 3d, recommended by Wuerzler, giving at the same time *Canthar.* 30th internally. This proceeding helps very rapidly in cases of superficial burns; if insufficient, I have recourse to the soap-poultice. In cases of very old burns I generally give with the best success *Caust.* 30th internally, For burns of the tongue I always use *Caust.* internally with the best result. That chalk stirred in water, is an excellent application to burns caused by corrosive acids, I have often witnessed in chemical laboratories. Vinegar affords rapid relief in cases of burns with lye, ammonia, quick-lime, or other alkalies. In cases of burns with boiling fat or oil, *Canth.* are preferable to all other applications, and a soap-poultice is the best application to scalds with boiling water. I am as yet without any experience regarding the application of *Urtica urens* to burns. If persons have burnt themselves with nettles, a dose of *Ars.* 30th two globules taken internally, affords speedy relief; *Caust.* may likewise accomplish this result. [An excellent application to burns and scalds, even of the most violent nature, is common *white paint*, which is to be applied with a very soft brush or a few soft rags tied together like a roll. Blisters have to be carefully opened with a pair of sharp scissors and the fluid let out, without the skin being torn or cut away. The paint is covered with a layer of loose flocks of cotton, and allowed to remain until it drops off. If fever sets in, a little Aconite may be given, and if the patient is very restless and cannot sleep, I dissolve a grain of Morphine in twelve dessert-spoonfuls of water, and give the patient a dessert-spoonful of this solution every half hour until he drops to sleep. Two spoonfuls are most generally sufficient to procure a refreshing sleep. I have cured the severest kinds of burn by this simple proceeding. H.]

## CHAPTER XXXII.

### HYPNOTIC PHENOMENA, SLEEP.

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1. **Sleeplessness.**—This difficulty, whether it occurs in chronic or acute diseases, disappears at the same time as the whole disease is cured by the proper remedy. It would be foolish to disturb the action of the chief remedy by giving a patient afflicted with pneumonia, typhus, etc., after the fashion of allopathic practice, a little sleeping potion every night, such as *Coff.*, or some similar remedy. If a lady, treated for some chronic malady, were to be given something to make her sleep, because she did not sleep as well as usual for a couple of nights, such a proceeding would be equally reprehensible for the reason that it is indispensable to the successful treatment of chronic maladies that the action of the leading remedy should not be interfered with. If any one wants to adopt this complacent mode of practising, he can only do so on condition that he renounces every expectation of ever accomplishing any satisfactory results in the treatment of chronic diseases. The first thing I do, when taking charge of a chronic patient who is troubled with sleeplessness, is to survey the remedies that will control this symptom, with a view of ascertaining whether, among the remedies for sleeplessness, there is one that corresponds to the whole condition. The following are the remedies that generally answer my purpose: *Bell.*, *Sulph.*, *Laches.*, *Calc.*, *Nux v.*, *Puls.*, *Rhus t.*, *Silic.*, *Hyosc.*, *China.*, *Ars.*, *Phosph.*, *Sepia;* and if the patient cannot fall asleep in the evening when lying down in bed, I depend upon *China.*, *Arsen.*, *Calc.*, *Carbo veg.*, *Graph.*, *Laches.*, *Nux v.*, *Sulph.*, *Phosph.*, *Sep.*, *Silic.;* if he is at the same time very sleepy in the day-time, *Bell.*, *Calc.*, *China.*, *Laches.*, *Hep. sulph.*, *Puls.*, *Sulph.*, *Phosph.*, *Carbo veg.*, *Graph.*, *Caust.;* if sleep is prevented by nervous excitement, *Calc.*, *China.*, *Lyc.*, *Laches.*, *Nux vom.*, *Sep.*, *Plat.*, *Silic.*, *Sulph.;* if sleep is prevented by an involuntary crowd of ideas, *Calc.*, *China*, *Laches.*, *Nux v.*, *Sulph.*, *Plat.*, *Puls.*, *Sep.*,

etc.; among these remedies which have already rendered me great service in many cases, I generally find one that is suitable to the general condition of the patient and which will at the same time remove the sleeplessness; if this symptom should not disappear entirely, it will certainly yield to a second remedy chosen for a similar purpose. In most cases the first symptom of improvement experienced by patients who had been tormented with sleeplessness for many nights in succession, is that they sleep better; very often the patients enjoy a sweet sleep the very first night, so that, if my remedy is perfectly adapted to the case, I am able to promise my patients beforehand that they will feel the good effects of my medicine the very first night. Of course I do not here speak of cases where sleep is prevented or interrupted by a violent fever, cough, acute pain, but only of cases where sleeplessness constitutes a symptom of itself, and where the patient is simply unable to fall asleep after going to bed at night, without being otherwise troubled with any apparent ailments. Besides this protracted sleeplessness resulting from a chronic disease, there is a sleeplessness which remains during the stage of convalescence from severe acute diseases, or after violent emotions, or which is the only abnormal symptom that otherwise perfectly healthy individuals complain of; in such circumstances, beside the remedies for nervous excitement and a crowding of ideas upon the imagination, we give for sleeplessness during convalescence from acute diseases, *Coff.;* if the patient is troubled by **phantasms,** *Bell., Opium, Cham., Calc., Silic.;* if by arithmetical **figures** before his eyes, *Sulph., Phosph. ac.;* after violent **emotions,** (joy, fright, etc.), *Acon., Coff.;* after **depressing** events (great losses, death, etc.), *Ignat., Sulph., Natr. mur.;* after excessive **mental exertions,** *Nux v., Laches.;* if sleep is prevented by great **excitement** of the circulation, *Acon., Nux v., Silic., Coff., Bry.*

2. **Restless sleep; nightmare; heavy dreams.**— What I have said of sleeplessness, likewise refers to **heavy,** disturbed sleep; if it occurs as a symptom of some chronic disease, the selection of the remedy must include a consideration of this symptom, though a remedy should never be chosen with exclusive reference to it. Nevertheless cases occur where this symptom constitutes an isolated abnormal condition, the individual being otherwise in perfect health; in such a case, the remedy for **nightmare,** if it affects wine-bibbers or persons leading a sedentary life,

is *Nux v.;* or if it is attended with heat, palpitation of the heart, rush of blood, *Acon.*, and if it attacks the person again and again, *Sulph.* or *Silic.*, and sometimes *Hep.*, *Natr. carb.*, *Phosph.*, or, if the attack sets in after a somewhat copious supper, *Bry.* or *Puls.* If sleep is disturbed by **heavy, anxious** dreams, the patient is relieved by *China.*, *Silic.*, *Acon.*, *Sulph.*, *Calc.*, *Lyc.* or *Phosph.;* if by dreams about **thieves,** *Ars.*, *Silic.*, *Laches.*, *Merc.;* about **ghosts,** *Sulph.*, *Carbo veg.*, *Ars.*, *Puls.*, *Dros.*, *Silic.;* about **frightful** things generally, *China*, *Nux v.*, *Calc.*, *Lyc.*, *Silic.*, *Graph.*, *Sulph.*, *Acon.*, *Puls.;* about **dead** persons, dying, *Silic.*, *Ars.*, *Kali carb.*, *Phosph.*, *Thuja;* for an excess of **fancies** during sleep, *Sulph.*, *Silic.*, *Calc.*, *Carbo veg.*, *Graph.*, *Natr. mur.*, *Kali carb.*, *Lyc.*

3. **Somnolence, sopor.**—Whether this symptom occur among hysteric persons, old men, or children, it always deserves our most serious attention, and often decides, and ought to decide the selection of the remedy. Sopor, which often sets in as a precursory symptom of apoplexy, with a long, deep sleep, more or less marked absence of consciousness, convulsive twitchings and greatly depressed pulse, is a very bad symptom. In such circumstances *Opium* is most commonly an efficient remedy, if the face is red, the breathing stertorous, with the mouth open, the eyes staring and distorted, slow and depressed pulse; or *Bell.*, if the face is pale and cold, with a small and quick pulse and furious look on waking; or *Laches*, especially if the sopor sets in typically every third day. If children are affected by sopor, *Cham.* generally helps, more particularly if the sopor is attended with twitchings, febrile heat, redness of one cheek, colic with greenish diarrhœa; if *Cham.* is not sufficient, *Tart. em.*, or even *Puls.* is most useful. For extreme somnolence in the day-time, *Sulph.*, *Bell.*, *Calc.*, *Antim. cr.*, *Bry.*, *Laches.*, *Puls.*, *Silic.*, *Nux v.*, *Baryt.*, are the best remedies.

## CHAPTER XXXIII.

### INTERMITTENT FEVER.

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1. **General Remark.**—A beginner in homœopathy, after having perused all that has been published on the treatment of intermittent fever by homœopathic physicians, knows not much more than he did at the beginning. He knows that intermittent fever can be cured by almost any remedy, but he has not learned what remedy will cure a given case of fever, for the reason that in the cases where the characteristic symptoms are not indicated, the general symptoms that are indicated, are common to almost every remedy. The difficulty is increased by the erroneous view that in a given case every symptom must be covered by the remedy. This view not only deceives the one who is hunting up a remedy, but likewise the therapeutist, since it leads him to present every recorded symptom of the case as a characteristic indication, whereas it may sometimes happen that but few of these symptoms are truly characteristic indications, and that the latter may even be entirely wanting. For this reason we are not astonished at the statement of an old and well-known homœopath in Belgium, that, in spite of the late Doctor Von Bœnninghausen's valuable work, which furnishes so many fine hints to a physician who knows how to distinguish the essential from the non-essential, he had never yet succeeded in curing a case of fever and ague homœopathically. For this reason it is of importance to a beginner that he should be presented with a definite number of appropriate remedies that may serve him as points of support in the treatment of fever and ague and enable him to determine what remedy is specifically adapted to a given case. In furnishing these points of support I desire to state at the onset that the accessory symptoms and the time when they make their appearance constitute, with a few exceptions, the chief curative indications rather than the succession of chill, heat, sweat and thirst, although even in this respect a few

remedies furnish reliable indications which I shall point out more clearly. In order to facilitate the study of these drugs I class these fever-remedies in several categories presenting them in the order of their practical importance as determined by their more or less frequent use in practice.

## 2. First Series or Category of the Fever-Remedies.

*Ipecacuanha*, one of the most important, with which I almost always commence the treatment unless some other remedy is distinctly indicated. I dissolve three globules of the thirtieth attenuation in a few tablespoonfuls of water, of which I give a teaspoonful every three hours commencing immediately after the chill; by pursuing this course I have cured many cases of fever and ague by the first prescription, thus saving myself a good deal of unnecessary seeking and comparing. If *Ipec.* does not always help altogether, it alters the character of the fever so that *Ars.*, *Arn.*, *Nux v.*, *Puls.*, *Ant. cr.* or *Ignat.* are indicated. *Ipec.* is specifically indicated, if large doses of Quinine had been given, or if the fever commences with an internal chill which gets worse in the warmth and is attended with oppression on the chest, nausea and vomiting between and during the attacks.

*Nux vomica*, very frequently after *Ipec.*, more particularly if, at the onset of the paroxysm, the extremities feel as if paralyzed and chill and heat are mingled, one being felt externally, the other internally, with dread of being uncovered in the least; attended with nausea and vertigo, deadness of the fingers and blueness of the nails during the chill.

*Arsenicum*, if chill and heat are mingled as under *Nux v.*, or occur alternately, together with great prostration, nausea, pain in the stomach, præcordial anxiety, spasms in the chest, oppression of breathing, pains in the whole body, bitter taste in the mouth, headache, appearance of these complaints shortly before or simultaneously with the chill.

*Pulsatilla*, if the chill, heat and thirst are worse in the afternoon and evening, attended with gastric complaints, bitter taste in the mouth, vomiting of mucus, bile, acidity, constant chilliness even between the paroxysms, even mucous diarrhœa with almost entire absence of thirst.

*China*, if the patients look jaundiced, the heat alternates with the chill or sets in long after, with great lassitude after the fever, and all sorts of ailments shortly previous to the attack, such as canine hunger, nausea, headache, anxiety and palpitation of the heart; restless sleep at night and waking in the morning with confusion of ideas.

*Natrum mur.*, if the chill lasts a long time, with violent headache which is still worse during the heat, deprives the patient of consciousness and obscures his vision, together with frequent vomiting of bile and mucus.

*Veratrum album*, for fevers with only external chilliness or chilliness lasting for hours; accompanied by paroxysms of vertigo, apathy, sallow and sunken countenance, nausea, vomiting and diarrhœa, or obstinate constipation.

### 3. Second Series of Fever-Remedies.

*Arnica*, if the chill generally sets in early in the morning or forenoon, preceded by a painful drawing in the limbs and bones, constant change of position because the bed feels too hard in any position of the body; coldness and chill especially in the region of the stomach, or cold hands with great heat in the head; indifferent mood, difficulty of collecting one's senses; foul odor from the mouth; sour, fetid sweat.

*Antimonium crudum*, very often if *Puls.* seems suitable but is not sufficient; gastric complaints, eructations, nausea, vomiting, bitter taste in the mouth, constipation or diarrhœa; absence of thirst; sweat during the heat.

*Bryonia*, when the same gastric complaints prevail, constipation or diarrhœa as under Antim., only with more thirst, more particularly if the chill is accompanied by splenetic stitches, flushed cheeks, and the heat by pleuritic stitches; creeping chills rather than a shaking chill; severe headache, with confusion of sense and delirium during the hot stage, or violent tearing pain in the limbs during the chill.

*Cina*, especially if the patients rub their noses a good deal (or in general if symptoms of worms are present), with canine hunger and vomiting before, during and after the fever, paleness of the countenance; clean tongue, with vomiting and diarrhœa.

*Ignatia*, if the fever is accompanied by few accessory symptoms, the chill can be controlled by external warmth, the patients talk but little, are listless and inclined to start, the heat is only felt externally and the chill is accompanied by thirst, no thirst during the heat.

*Belladonna*, the patient experiences a violent chill in the pit of the stomach, either the chill or the heat is very violent, or the fever is accompanied by violent headache with vertigo, stupefaction and delirium, and by an eruption in the corner of the mouth or on the lips.

*Aconitum*, if both the chill and the heat are very severe; the heat is particularly felt in the face, with flushes on the cheeks, præcordial anguish, especially in the case of young and plethoric patients, also attended with violent compressive pains in the head and nape of the neck.

*Hepar sulphuris*, if the fever is preceded or accompanied by urticaria, or by cough, coryza and respiratory difficulties, and the heat is accompanied by sleep.

*Calcarea*, especially in the case of large-bellied individuals, with internal heat and external chilliness; attended with vertigo, heaviness in the head and limbs, tearing in the limbs and pain in the small of the back; alternate diarrhœa and constipation.

*Rhus t.*, if the fever is accompanied by urticaria, colic with diarrhœa, great anxiety, palpitation of the heart, some parts feeling chilly, others hot.

### 4. Third Series of Fever-Remedies.

*Carbo veg.*, if the paroxysms are accompanied by tearing in the teeth and extremities, with throbbing in the temples; and if vertigo with headache, and flushes on the cheeks set in during the paroxysm, and the region of the stomach is puffed up between the paroxysms.

*Chamomilla*, especially in the case of children and likewise in that of adults, if the attack is attended with gastric complaints, coated tongue, nausea, vomiting of bile, diarrhœa, pressure at the pit of the stomach, irritable and restless disposition, the chill is but slight and the thirst continues even during the perspiration.

*Capsicum*, especially in the case of stout, phlegmatic individuals, with violent burning during the heat, annoying irritation of the

mucous lining in various ways, burning mucous diarrhœa, painful swelling of the spleen and thirst only during the chill, not during the heat.

*Sulphur*, if the fever sets in after the suppression of chronic exanthems, with nocturnal heat, perspiration early in the morning and palpitation of the heart.

*Ferrum*, if the fever is accompanied by a good deal of rush of blood to the head, with distention of the veins, bloating below or around the eyes, repletion and pressure at the stomach, vomiting of the ingesta, debility, palpitation of the heart, ague-cake, swelling of the feet; more especially after abuse of cinchona.

*Coffea*, if the fever is accompanied by great mental excitement, with thirst during the perspiration, diarrhœa, sensitiveness to all kinds of impressions.

*Hyoscyamus*, if *Bell.* and *Opium* are not sufficient in congestive chills, or if sleep is disturbed by a dry nocturnal cough.

*Opium*, if the fever is accompanied by a deep stupor, with stertorous breathing, with the mouth open, twitching of the extremeties.

*Sabadilla*, especially if the fever consists only of a chill, with alternate attacks of canine hunger and loathing of food.

*Cocculus*, if the paroxysms are attended with spinal irritation, cardialgia or other spasmodic attacks, especially in the case of hysteric females, with obstinate constipation.

*Sambucus*, if the perspiration is very profuse and continues from one paroxysm to the other.

## Special Indications.

1. **Indications** in accordance with the **fever-symptoms.**—I have found the best remedies to be, if the **chill** is most **marked,** *Verat. alb.*, *Sabad.*, *China*, *Puls.*, *Ipecac.;* if the chill is almost entirely **wanting,** *Acon.*, *Bry.*, *Ars.*, *Cham.*, *Caps.;* if **chill and heat alternate,** *Ars.*, *China*, *Nux v.*, *Calc.;* if both are present **at the same time,** *Acon.*, *Arsen.*, *Nux vom.*, *Puls.*, *Cham.*, *Ign.;* **chilliness externally,** heat internally, *Calc.*, *Verat. alb.*, *Puls.*, *China*, *Arn.;* **chill internally,** heat externally, *Ignat.*, *Nux vom.*, *Acon.*, *Bell.*, *Arsen.;* if **heat** is **most marked,** *Bell.*, *Acon.*, *Bry.;* if it is entirely **absent,** *Arsen.*, *Verat. alb.*, *Sabad.;* if **attended** by **perspiration,**

*Ant. cr.;* if the perspiration only breaks out a **long time after the heat,** *Ars.;* if the perspiration is **entirely** or **almost** entirely **absent,** *Ars., Cina, Ipec.;* with **copious** perspiration, *Samb., Verat. alb., Puls., Bry., Rhus t., Carbo veg.;* if the **perspiration** and **chill** break out **at the same time,** *Sulph., Lyc., Puls., Sabad.;* if the perspiration breaks out **immediately after** the chill, without any heat, *Rhus t., Lyc., Verat. alb., Bry., Caps., Sabad.;* if the perspiration has a **sour smell,** *Arn., Ars., Rhus t., Carbo veg., Verat. alb., Lyc.;* if the perspiration is **cold,** *Verat. alb., China, Ars., Ipecac.;* if **viscid,** *Cham., Ars., Verat. alb.;* Again, if the heat or the chill is **preceded by a variety of ailments,** *Ars., China, Ipec., Natr. mur., Rhus t.;* if the chill sets in with **vomiting,** *Cina, Ipec.;* with **backache,** *China;* with **pains in the limbs,** *Arn., Ars.;* with **blueness** of single parts, *Ars., Nux vom.;* if the chill proceeds from the pit or region of the **stomach,** *Arn., Bell.;* from the **back,** *China, Rhus t.;* if the **chill** is **aggravated by external warmth,** *Ipec.;* if **improved** by external warmth, *Ignat.;* if the patient, as soon as **uncovered,** feels **chilly during the heat** and **perspiration,** *Nux vom.:* if the attacks are **very short,** *Ipec., Sabad., Puls., Cina.*

2. **Indications** according to the **causes and existing circumstances.**—For intermittent fevers **after abuse of Cinchona,** *Ipecac., Ars., Fer., Natr. mur., Puls., Carbo veg., Verat. alb., Arn.;* in **marshy regions,** *China, Ars., Ipec.;* for **congestive chills** (febris perniciosa), *Bell., Hyosc., Opium, Verat. alb.* [also *Gelsem.* and *Quinine.* H.]; for **spring-intermittents,** *Laches., Puls., Sabad.;* in the case of **children,** *Cham., Acon., Ipec.;* stout, **phlegmatic** children, *Caps., Calc., Natr. mur.;* **plethoric,** robust people, *Acon., Nux v.;* feeble, anæmic, **chlorotic** individuals, *Fer., China, Puls.;* with **dropsical** conditions, *Fer., China, Ars.;* **scrofulous** individuals, *Calc., Bell., Natr. mur., Sulph.;* with **worm-symptoms,** *Cina, Merc.;* after a fit of **chagrin,** *Cham., Bry.;* if a relapse is caused by **errors in diet,** *Puls., Ipec., Ant. cr., Nux vom.;* if **worse** in the **evening** and afternoon, *Puls.;* if the accessory ailments are aggravated by **motion,** *Ars., Bry.*

3. **Indications** according to the **accessory symptoms.**—If all the senses are extremely **sensitive,** *Coff., Nux vom., Acon.;* **quiet,** taciturn, *Ign.;* **irascible,** *Bry., Nux v.;* **delirious,** *Bell.;* **stupor,** *Bell., Hyosc., Opium, Verat. alb.;* **sopor,** *Opium, Verat. alb.;*

**rush of blood** to the head, *Bell.*, *Fer.*, *Arn.*, *Opium;* violent **headache,** *Bell.*, *Hyosc.*, *Arn.*, *Natr. mur.*, *Nux v.*, *Puls.;* **jaundiced** face, *China*, *Nux v.*, *Verat. alb.*, *Ars.*, *Natr. mur.*, *Fer.*, *Puls.*, *Arn.;* **bloated** countenance, *Fer.*, *Cina*, *Ipec.*, *Arsen.;* **pale** face, *Cina*, *Ipec.*, *Fer.*, *Puls.*, *Natr. mur.;* **gastric** complaints, (nausea, vomiting, etc.), *Ant. cr.*, *Ipec.*, *Cina*, *Nux v.*, *Verat. alb.*, *Natr. mur.*, *Fer.;* if the tongue is **clean,** *Ipec.*, *Cina;* **canine hunger,** *China*, *Cina;* **bilious** symptoms, *Cham.*, *Nux v.*, *Puls.;* **thirst,** continually, *Natr. mur.*, *Verat. alb.;* thirst **before the chill,** *Arn.*, *China*, *Puls.*, *Nux vom.;* **during** the chill, *Calc.*, *Caps.*, *Natr. mur.*, *Ars.*, *Bry.*, *Carbo veg.*, *Cham.*, *Cina*, *Ign.*, *Arn.*, *Nux vom.*, *Rhus t.*, *Verat. alb.;* during **the heat,** *Ars.*, *Acon.*, *Ipec.*, *Bry.*, *Sulph.;* **after** the heat, *China*, *Nux v.*, *Puls.;* **during** the perspiration, *Cham.*, *Ars.*, *China*, *Natr. mur.;* **after** the perspiration, *Lyc.*, *Nux vom.*, *Sabad.;* **absence** of **thirst,** all the time, *Puls.*, *Ipec.*, *Ant. cr.;* during the **heat,** *Ign.*, *China*, *Caps.*, *Carbo veg.*, *Ars.;* **painfulness** of the pit and region of the stomach, *Nux vom.*, *Cham.*, *Carbo veg.*, *Rhus t.*, *Cocc.;* **liver-complaint,** swelling, hardness etc., *Ars.*, *China*, *Fer.*, *Nux v.;* **enlargement of the spleen,** *Ars.*, *China*, *Fer.*, *Caps.*, *Cham.*, *Nux v.*, *Carbo veg.*, *Arn.*, *Calc.*, *Verat. alb.*, *Bell.;* **splenetic stitches,** *Arn.*, *Bry.*, *Carbo veg.;* **constipation,** *Nux vom.*, *Verat. alb.*, *Bry.*, *Calc.*, *Lyc.*, *Natr. mur.;* **diarrhœa,** *Ars.*, *Verat alb.*, *Ipec.*, *Rhus t.*, *Cham.*, *Caps.*, *China*, *Puls.;* **cough,** *Hyosc.*, *Puls.*, *Bry.*, *Acon.*, *Nux v.;* **hoarseness,** *Carbo veg.;* **oppression of the chest,** *Ars.*, *Ipec.*, *Puls.;* **palpitation of the heart,** *Sulph.*, *Merc.;* **pleuritic stitches,** *Acon.*, *Bry.;* **backache,** pain in the **small of the back,** *Nux v.*, *Calc.;* **pains in the limbs,** *Ars.*, *Arn.*, *China*, *Lyc.*, *Natr. mur.*, *Rhus t.*, *Verat. alb.;* **lassitude** and weakness, *Ars.*, *Verat. alb.*, *China*, *Ipec.*, *Fer.;* **dropsical** conditions, *Fer.*, *Ars.*, *China;* **spasmodic** symptoms, *Ign.*, *Cocc.;* **lameness** of the extremities, *Nux vom.*, *Verat. alb.;* **syncope,** *Verat. alb.*, *Ipec.;* **eruptions** on the lips, *Ars.*, *Bell.*, *Hepar*, *Natr. mur.*, *Verat. alb.;* **urticaria,** *Rhus t.*, *Ars.*, *Hepar.*

## CHAPTER XXXIV.

## TYPHUS, TYPHOID FEVERS.

### 1. Diagnostic Remarks.

1. **General nature of Typhoid Fevers.**—Although, since Andral first attempted to demonstrate the perfect identity of the fevers which previously had been classified as so many special diseases under the names of febris nervoso versatilis, typhosa, cerebralis, abdominalis, putrida, hospital fever, etc., pathologists are now generally agreed to regard these different forms as quantitatively but not qualitatively different manifestations of one and the same fever, namely **typhus**; yet, after what I have observed here in Paris for the last thirty years, where a few cases of typhus turn up every fall in the practice of almost every physician, I desire to call attention to a distinction which, if only superficially looked at, might easily lead to wrong pathological conclusions. It is well known that in the fully-developed typhus, the primary type of the disease, the peculiar celebral symptoms first, and subsequently the abdominal and pectoral symptoms, make their appearance, so that the disease really comprehends these three categories of symptoms, which in severe cases sometimes exist simultaneously. But as in every epidemic the person who is attacked by it, never shows all the symptoms of the disease, and one is attacked by one series and the other more particularly by another series of phenomena; as, in cholera, for instance, one is more especially attacked by spasms, another is almost at once struck down by the cyanotic form of the disease, a third is only suffering with vomiting and diarrhœa, and in case of neglect all these different categories of symptoms may develop themselves seriatim in the course of the same case—so in typhus. Inasmuch as an inflammatory irritation of the brain initiates the whole series of the typhoid phenomena, the disease, in mild cases, may remain stationary at this stage, in which case we only observe the series of symptoms that used to be designated as cerebral typhus, or by the antiquated term of febris nervosa

versatilis, or, among the French, as fièvre cérébrale. Although at the commencement or even at the end of epidemic typhus, and sometimes in sporadic cases, the disease does not always run beyond the cerebral stage, and in that case, can sometimes be cured in two to three weeks, whereas the fully-developed typhus often runs a course of six weeks; yet, we would be wrong if we were to treat it as an idiopathic form of disease, since it is really nothing else than a form of typhus that had been arrested in its further development. On the other hand, if the specific inflammatory irritation proceeds with great rapidity from the brain to the spinal marrow, the cerebral stage may become speedily transformed into the intestinal affection, when the disease will present the image of an abdominal typhus, during the course of which the cerebral symptoms, which are never wanting, appear rather in the light of consensual reflex symptoms, whereas, however, even in such a case the intestinal affection is really only a symptom of the whole disease. If, during the course of such an abdominal affection, which generally does not set in until the epidemic has reached its height, signs of an incipient decomposition of the fluids make their appearance, such as bluish ulcers of the mouth, ecchymoses, stools having a cadaverous smell, etc., a physician who sees his patient suddenly plunged into such a condition, might easily be led to believe in the existence of an idiopathic putrid fever, although he has in reality nothing before him but a case of typhus that is speedily hurrying towards its most dangerous stage. If the lungs are more strikingly attacked than the intestinal canal (Peyer's glands), we have the so-called pulmonary typhus, which must not be confounded with simple pneumonia that has assumed a typhoid character, the pneumo-typhus showing at the same time, the presence of cerebral symptoms. This form of typhus, which is confined to the brain and lungs, is exceedingly rare, although such forms of spontaneous pulmonary typhus have occurred to me in my practice, in which case they seemed to act as vicarious manifestations of the whole disease. It is a fact, however, that even the lightest form of cerebral typhus is always accompanied by a catarrhal irritation of the mucous lining; if this irritation is very severe and complicated with cerebral symptoms, but not with symptoms of intestinal typhus, such a form constitutes what might be termed mucous fever, or the French fièvre muqueuse, which may run a very mild course as well as terminate in the most violent abdominal typhus.

Whatever be the form under which typhus manifests itself, we may rest assured that we have a case of typhus before us whenever the signs which commonly characterize this disease, are present in a case, such as sudden prostration of strength, out of all proportion to the existing complaint, compelling the patient to keep his bed without any other cause than this general feeling of weakness; great indifference, apathy and dullness of sense; an irritated, quick pulse, which is sometimes not increased in volume; catarrhal irritation of the thoracic organs (and of the intestines), rumbling in the ileo-cœcal region, and more or less perceptible enlargement of the spleen. At the onset there may be no swelling of Peyer's glands, which, according to some French pathologists and some of their German imitators, constitutes the whole of typhus, and yet the pathological process may essentially be a typhous process; if the patient is absurdly treated with venesections, or homœopathically with Aconite and Crocus that never help in such a case, the swelling of these glands will soon set in; we need not feel anxious that it will not.

2. **General course of the disease.**—Although no disease runs a more insidious course than typhoid fevers, inasmuch as they may take a dangerous and not at all suspected turn between evening and morning, yet, however short each stage may be, we can distinguish four different stages, in the normal course of the fever, namely: 1, the preliminary stage; 2, the stage of inflammatory irritation with predominance of the cerebral symptoms; 3, the stage of vital depression with incipient abdominal affections; 4, the stage of fully-developed abdominal typhus and first manifestation of critical changes. If the fever runs a normal course, each of these stages lasts about a week; in general the progression of typhus in periods of seven to seven days cannot well be misapprehended. Already the preliminary stage is distinguished by characteristic symptoms. The patient feels languid, weary, not disposed to do any thing, feels as if he would be very sick, has no appetite; when pressing upon the pit of the stomach a pain is often experienced in this region; a backache is occasionally complained of, or electric shocks in the limbs, occasional attacks of vertigo, and very commonly, at least here in Paris, watery diarrhœa, headache and a feverish pulse. These three last-mentioned symptoms, which, when associated with the other symp-

toms, always enable me to diagnose the advent of typhus with perfect certainty, sometimes disappear (except the feverish pulse) very suddenly shortly before the outbreak of the real typhus, without the help of any medicine. The fever generally breaks out on the eighth day of the preliminary stage, not unfrequently after the patient had felt a little better for 24 or 48 hours, and had eaten something with a little relish. It generally sets in with a chill or a creeping shiver proceeding from the back, and very soon is succeeded by a burning heat and such a prostration of strength that the patient is unable to remain up and has to go to bed. The heat now continues to increase, the thirst is intense, pulse full and frequent, about 120 beats, scanty discharge of a red-brown urine, and evening exacerbations of the fever; at the same time the patient complains of a painful pressure in the forehead and occiput, vertigo, mental indolence, and, soon after, of dullness of the senses, stupefaction, buzzing in the ears, cough with some expectoration, and more or less oppression of the chest, and, in a few cases, inflammation of the tonsils and lungs. About the fourth day of this stage the sudamina or white miliaria, peculiar to typhus, are apt to make their appearance, together with the petechiæ which are usually most visible on the abdomen, and the appearance of which is sometimes followed by nosebleed and swelling of the parotid glands, whereas the catarrhal symptoms abate and the patient usually feels a little better towards the sixth or seventh day of this stage. On the seventh day of this stage, the fourteenth from the beginning of the preliminary symptoms, a rise of fever generally takes place during the night preceding the eighth day, in consequence of which the skin becomes dry and tense as parchment, with a peculiar biting-stinging warmth (calor mordax), the beginning of a new stage, where the petechiæ, if they had not yet made their appearance, break out without fail and during which a brown mucus accumulates on the dry tongue, the teeth and in the nose, the abdomen becomes distended, sensitive to pressure and cadaverously-smelling stools already begin to make their appearance. The more the intestinal affection becomes developed during this stage, the more marked become the symptoms of the so-called **typhomania**, when the patient lies on his back in a state of stupor and utter insensibility to external impressions. These symptoms increase until the fourteenth day, the 21st from the appearance of the precursory symptoms, although on the

tenth or eleventh a few incomplete critical manifestations are sometimes perceived, after which the symptoms generally assume a much more frightful character. Towards the thirteenth and fourteenth day of the fully-developed typhus the danger to life becomes greatest; a new exacerbation now sets in, and, unless a decisive crisis occurs, the disease now enters upon its fourth stage, that of abdominal typhus, which has now reached the acme of its development. If no critical change takes place, the patient, at this stage, may die suddenly of apoplexy, or, if this result does not take place, the symptoms increase in gravity in the most appalling manner; the patient settles down in the bed, the fæces and urine escape involuntarily, picking at flocks, subsultus tendinum, convulsions set in, and death generally takes place on the 21st or 28th day of the fully-developed typhus. If a decided crisis had set in between the 14th and 21st day, marked by the breaking out of a profuse, alleviating perspiration, and the reappearance of an undulating character of the pulse, further critical phenomena gradually develop themselves in this stage, the patient passes papescent stools which occasionally have still a foul smell but afford him great relief, the urine flows more copiously and deposits a sediment, the crusts in the nose and the mucus in the air-passages become detached, the tongue becomes moist and cleans off, the consciousness is restored, the thirst ceases, the fever disappears, and the functions gradually resume their natural course. In this manner the critical process usually continues with more or less rapidity until the 21st day of the fever or the 28th day from the first appearance of the prodromic symptoms; on the 21st day of the fever a new rise of fever is very apt to take place, which, if improperly managed or if resulting from errors in diet, may occasion a slight delirium and disturb the critical evacuations that had begun to set in, so that they have to resume their course from the beginning, which is not apt to take place before the 28th or 35th day. But even if no error had been committed, the 21st and 28th day of the fever are still more or less critical days as regards the progress of the evacuations, which is sometimes not completed under a fortnight, so that the whole course of a fully-developed typhus seldom terminates before the end of the fourth week, calculated from the time when the fever first broke out; and, if the critical changes were disturbed, not before the end of the fifth or sixth week. The most important days in the whole

course of the fever are the 13th and 14th day. If no critical sign of a decided improvement becomes apparent on these days, or if no crisis takes place on the 21st or 28th day, and the patient had up to that period been treated with large doses of Quinine and blood-letting, I consider him doomed beyond peradventure, nor have I ever been able to save a patient who came into my hands under such circumstances.

3. **Complications of Typhus.**—By such complications I understand phenomena which, although a natural sequel of typhus, do not necessarily constitute a part of the essential symptoms of the disease, but may appear in one case and be absent in another case, without the fever being on that account anything else than typhus. Among these complications we reckon the paroxysms of vertigo, nosebleed and fainting, which very often set in with great violence at the onset of the disease and are regarded by some as very unfavorable complications, but which I personally dread no more than any other symptom. If at the moment when the preliminary stage is passed and the typhus has fully set in, the chill is at once followed by heat, the patient loses his consciousness, and the urine and stool are evacuated involuntarily, I regard these symptoms as exceedingly unfavorable prognostic signs. During the epidemic typhus of 1853, I had three cases of this kind to treat. Arnica had a marvellous effect at first, for the involuntary evacuations abated and the consciousness returned; but in the further course of the disease the typhomania reappeared with all sorts of distressing phenomena which no remedy seemed able to control, and all three died on the fourteenth day of the disease. Nor do I fear inflammatory conditions of the lungs and liver, which set in at the onset; any more than hæmorrhages from the anus, provided the other symptoms are not unfavorable and the strength does nor suddenly sink to the lowest degree of prostration. The sooner sudamina and petechiæ break out, the more favorable a phenomenon they seem to me; on the other hand, what is predicated by some of the ominous character of red miliaria and erysipelatous inflammations of the skin, is perfectly correct; I know of no worse symptoms than these. Nor is a complication with parotitis, after the appearance of the exanthemata, a dangerous symptom, any more than gangrenous ulcerations. As regards diarrhœa, if it sets in previous to the stage of the regular critical

evacuations, I regard it as a very bad sign, which always denotes ulceration of Peyer's glands, that is more to be dreaded than any other symptom. On the contrary, if the stools are papescent and afford relief, and they occur during the period of the critical evacuations, I hail them with considerable ease of mind; previous to this period the most obstinate constipation is preferable to the least diarrhœa. I have not yet lost a single patient in whom, up to that time, the bowels remained constipated or the alvine evacuations were at least rare and firm; whereas violent, cadaverously-smelling diarrhœic stools, setting in in the second week, resulted in the destruction of the patient. Generally speaking, favorable prognostic signs are: Appearance and continuance of the sudamina and petechiæ from the fourth to the ninth, or from the eleventh to the sixteenth say when calculating from the first day of the prodromi; distinct remissions in the morning hours, moist tongue, continued moistness of the mucus in the anterior and posterior nares. On the other hand, if the exanthem does not come out in the first week of the fully-developed typhus; or, if the petechiæ do not show themselves until at a late period, look pale or bluish, and hæmorrhages from the nose or anus supervene, with bluish aphthæ and ulcers in the mouth, dry and brown tongue, brown mucus on the gums and dry crusts in the nose, or even ecchymoses under the skin, grasping at flocks, subsultus tendinum and blueness of the nose and ears; the task which art is called upon to achieve in such a case, is so difficult that even the most skillful practitioner may well shrink back in despair. As a general rule, however, I do not even dread the dry and brown tongue, with dry, brown crusts on the lips and desiccated nasal mucus, provided the patient has not had any debilitating treatment, the patient's constitution is generally sound, and no other ominous symptoms are in the way. Last year I had a case of this kind. The patient was a young German who was here visiting the exhibition. I had treated him for typhus for a fortnight past, ever since he was first taken sick; everything had been going on so satisfactorily that the patient, who had been very severely attacked, like most persons who are unused to the Paris climate, had never sunk into typhomania, and the pulse, which at first had been 120, had gone down to 80; when the patient's father drove up at my office one morning at an early hour and wished me to visit his son immediately, who, as he stated, was worse than ever and had lost

his speech. On my arrival I found the young man, who had felt tolerably well the day previous, in a sort of stupor, with a brown, parched tongue as hard as a board, teeth and gums covered with a brown mucus and the nasal mucus dried up to hard crusts. I at once prescribed *Rhus* 30th, three globules in a few tablespoonfuls of water, a teaspoonful to be taken every two or three hours. When I called again, in the evening, the moistness of the lining membrane had been restored, the patient was again able to talk and had recovered his consciousness entirely. In three days every trace of this accident had disappeared. During my treatment of typhus I have met with several such complications which were neither foreseen nor suspected, and could not well be foreseen, so that, upon the whole, it is difficult to determine whether a single symptom of itself is bad or good, since this can only be decided by the whole course of the disease and the totality of the symptoms. Since it is even impossible in the most favorable circumstances to determine beforehand what changes may take place until morning, although the patient had been left in a tolerably satisfactory condition the evening before; it is really impossible to establish a perfectly-reliable prognosis in this insidious malady before the critical evacuations have set in; and even then we cannot be perfectly sure of our prognosis, since the critical evacuations may be interrupted by imperceptible influences and a bad turn may thus be brought about. If a case of typhus can be taken charge of from the commencement, such incidental aggravations occur much less frequently; nobody, however, who has had an opportunity of observing and treating typhus, will deny that such aggravations may occur in spite of the best treatment, either in consequence of indiscretions committed by the patient, or of sudden changes in the electrical tension of the atmosphere and similar causes.

## 2. Treatment of the Typhus.

1. **General Remark.**—In Rueckert's "Klinischen Erfahrungen," page 679, we find several observations by various physicians concerning the treatment of typhus, which are of the highest importance; on the other hand, there are other statements, such as Bosch's proceeding, which I could not, on any account,

recommend as an example to be imitated by a young practitioner. Altogether the alternate use of two drugs is a proceeding of very doubtful propriety; if the treatment is unsuccessful, it is impossible to tell which of the two remedies is the cause of the want of success, and the physician generally abandons both, whereas the continued use of one of them might perhaps have been followed by eminent success. Even if the alternate use of two drugs results in success, yet the success is never as prompt as when a single truly-suitable remedy is given. I do not believe that in the case narrated above the improvement obtained by means of *Rhus* 30th would have been so prompt, if I had given this remedy in alternation with some other medicine. The alternate use of *Rhus* and *Bry.* as recommended by Hahnemann and which was probably imitated by Bœnninghausen as recommended by the former, is something entirely different. These two remedies were not used in immediate alternation, but *Bry.* having been allowed to act for a few days and the improvement seeming to remain stationary after this period, *Rhus t.* was given for an equally long period, to be again followed in a similar manner by *Bry.* if necessary. I have sometimes indulged in this mode of alternating two drugs, discontinuing, however, one of them if it was no longer indicated by the symptoms. In such circumstances, if quick action is required, a second remedy may even be administered in twelve hours, if the first one should have no effect, the first remedy being again resorted to in twelve hours, if a change in the symptoms should require it. If, in the above-mentioned case, *Rhus t.* had not produced an improvement in twelve hours, I should have given *Ars.* in the next twelve hours, and if *Ars.* had remained fruitless, and the delirium to which *Rhus* is appropriate, had supervened, I should have returned to *Rhus*, and so on according to the symptoms. In other respects I generally agree with the rules laid down by Goullon, not only as regards the propriety of waiting, when after the removal of the first inflammatory symptoms, the disease seems to remain stationary, but likewise as regards the necessity of at once selecting another drug if the medicine that the patient is taking during the period of development of the intestinal affection, does not produce an improvement in the space of twelve hours. What this distinguished practitioner and therapeutist says of the so-called antipsoric remedies, has my perfect acquiescence. I have treated many cases of typhus and (with the exception of a few extraordinary symptoms) I have never even in the severest

cases of abdominal typhus, had to use any other remedies than, *Bry.*, *Rhus t.*, (*Nux v.*, *Bell.*,) *Lyc.*, (*Carbo veg.*,) *Phosph.*, *Ars.*, *Calc.*, *Nitr. ac.* and *Sulph.*, the proper use of which does infinitely more good than the empirical resort to *Crocus* and *Ruta*, which one of my young colleagues here undertook to try in several of his cases, to his great regret, and which he abandoned again very speedily. As regards the cold ablutions which Vehsemeyer combines as a purely dietetic measure with the medicinal treatment, I continue them every morning very systematically in all cases where the patients are used to them, as long as they are able to leave the bed for a few minutes; I have always noticed the most excellent results from such a proceeding. As long as the season permits, I allow the windows to remain open, simply avoiding a draught of air; for it is a well-known fact that soldiers on the march who are attacked with hospital-fever, get along much better as long as they have a bountiful supply of pure, fresh, even cold air; whereas, as soon as the army makes a halt, and the patients are placed in confined rooms, they generally die like flies in the fall. I once treated a lady of means, whom I had carried to a house with a garden attached to it, situated in a dry and healthy locality in the country, recommending her, since it was summer-season, to remain in the open air as long as she possibly could. Every day she was carried into the garden, and under this treatment the typhus ran a mild and favorable course. As regards diet, I feed my patients, until a critical sediment makes its appearance in the urine, on mucilaginous beverages (oat-meal gruel, barley-gruel, rice-water etc.); after the fever has entirely disappeared, I add good broth to these decoctions, afterwards a piece of pigeon with a little bread and quince or raspberry-jelly for dessert, and in a few days give them a mutton-chop without the fat, until they gradually resume their ordinary diet. However I do not permit them to fully indulge their ravenous appetite until they have gone out again in the open air and have resumed their occupations.

2. **Treatment** of the **prodromic stage.**—By timely interference in this stage I have often succeeded in stifling the whole disease in its germ or at least in mitigating its character to such an extent that in some cases nothing remained but great lassitude and apathy, an utter loss of appetite, occasional slight attacks of gastric derangements, and a slight fever with distinct

morning-remissions and evening-exacerbations, continuing its course until the 21st day, with a rise of fever every seven days, and winding up at its termination with critical sediments in the urine and critical sweats. As soon as the peculiar lassitude and heaviness in the limbs are felt, with headache, white-coated tongue, loss of appetite, and restless sleep, and if constipation and empty eructations are complained of, I give *Bry.*, or, if the constipation is attended by vertigo, or sour or bitter eructations *Nux v.* If the peculiar diarrhœa is present, which is likewise one of the precursory symptoms, (for which *Bry.* is likewise very often useful,) I give *Rhus*, if *Bry.* should have no effect and the eructations are still empty; if *Rhus* does not help and the diarrhœa is accompanied by bitter-sour eructations, I give *Puls.* or even *Phosph.* I give these remedies in a single dose, two globules of the thirtieth attenuation dry on the tongue, and change my prescription if neither the headache nor the diarrhœa improves in 24 hours. [An excellent remedy in this stage is *Baptisia tinctoria.* H.]

3. Treatment of the **first stage** of the **fever** and of the **cerebral irritation** (cerebral typhus).—I comprehend these two conditions under one heading, because if the disease runs a mild course, even if it should afterwards terminate in abdominal typhus, the cerebral symptoms always first claim our attention. The fever generally has the character of an inflammatory fever for which *Acon.*, however, is of no use, and upon which, if the cerebral affection is very prominent, *Acon.* even acts injuriously. In such cases the chief remedy is undoubtedly *Bry.* which deserves a preference over *Acon.*, if symptoms of cerebral irritation are either present or absent, and signs of an inflammatory affection are observed, such as dry cough, stitches in the lungs or pleura etc. If the darting-tearing pains mentioned by Hahnemann, and which are aggravated by motion, are present, or if the pains are throbbing, a single dose of *Bry.* is often sufficient to quiet this state of cerebral irritation, whether delirium is present or not. If the patient is delirious, with his eyes open, and if, on closing the eyes, all sorts of frightful phantasms are seen, and a furious delirium sets in, with desire to escape from the bed, *Bell.* is the remedy, and if it does not help, *Hyosc.* or *Stram.*, whereas *Bry.* again deserves the preference if the delirium is of a mild character and the patient talks about his daily avocations. If a wild delirium alternates

with stupor and stertorous breathing, with open mouth and depression of the lower jaw, *Opium* or *Laches.* alone can help. If the patient sinks into a state of apathy and stupefaction, as if sensibility and intelligence were totally suspended, *Hyosc.* helps, and if the stupefaction is attended with involuntary discharges of stool and urine, *Arn.* is the remedy. If at this stage the vital force suddenly sinks, with muttering delirium, apathy, loss of sense, bluish redness of the face and a feeble, intermittent pulse, *Verat. alb.* helps. These last-named remedies really are only intercurrent remedies after which, if the threatening symptoms have been removed and the disease has not yet assumed the character of a fully-developed typhus abdominalis, it is well to again give a dose of *Bry.* which may even prove of great service after sudamina and petechiæ have already broken out, provided no diarrhœa has as yet set in; if diarrhœa sets in and the tearing pains in the extremeties are worse during rest, *Rhus t.* will have to be given at this stage in the place of *Bry.*, which may again be resorted to after *Rhus.* If *Bry.* does not relieve the catarrhal and pulmonary difficulties manifesting themselves in this inflammatory stage, *Phosph.* will often be found a very efficient remedy. In this stage I give every remedy in water, three globules of the 30th attenuation, a teaspoonful every two or three hours.

4. Treatment of the stage of **vital depression** and of the **abdominal affection** (typhus abdominalis).—This stage, which constitutes the second and third stage of typhus, that is to say the stage of the incipient and fully-developed typhus abdominalis, requires for the most part other remedies besides *Bry.*, more particularly *Rhus t.*, *Ars.*, *Calc.*, *Lyc.*, *Nitri. ac.*, *Phosph.* and *Carbo veg.* If constipation still exists and hence the intestinal ulceration has not yet commenced, and if the sudamina and petechiæ had already broken out during the inflammatory stage, *Bry.* is very often sufficient to bring the disease safely to a critical termination; in my practice *Bry.* has achieved this result in many cases where no other medicine was required. If these exanthemata delay, and if, on the fourteenth day of the disease, the fever rises again and new symptoms of cerebral irritation make their appearance, with twitchings, delirium and frightful visions or great anguish, I cannot, with Goullon, sufficiently praise *Calc.*, whether diarrhœa is present or not. To this remedy as well as to *Lyc.*, more particu-

larly if there is muttering delirium, grasping at flocks, bloating of the bowels, (and which should be given for similar symptoms after *Calc.*,) I am indebted for a fine development of the exanthemata in many cases, with great relief to the patient from some of his distress. If no diarrhœa has yet set in, *Bry.* may again be resorted to with good success after the appearance of the exanthems, and may be continued until the disease has reached the period of critical evacuations. If diarrhœa has set in, and the discharges are still yellow, watery or slimy, the tongue is only thinly coated and pale, and the patients are very feeble, and they lie in a state of stupid insensibility and taciturn mood, the chief remedy is *Phosph. ac.*, and if the tongue has a thick and white coating, and the evacuations consist of a greenish mucus, *Nitr. ac.* often proves excellent; if the tongue is quite dry, the diarrhœa painless and profuse, streaked with blood, like flesh-water, *Phosph.* is the remedy; if the tongue is brown, parched and hard as wood, and the diarrhœa is watery, or yellowish-brown bloody, and has a cadaverous ordor, *Rhus t.;* if the diarrhœa stools are black-brown and involuntary, *Ars.* or *Carbo veg.; Phosph.* if the stools are black like coffee dregs. If these symptoms of intestinal ulceration become associated with hæmorrhage from the anus, and *Nitr. ac.* is not sufficient to arrest this symptom, *Ars.*, *Mur. ac.* or *Phosph.* may be given; hæmorrhages from other organs require *Phosph.*, *Ars.* or *Carbo veg.;* if the strength is all gone, and the patient settles down in the bed, and paralysis threatens, *Mur. ac.* will help, if *Rhus t.* and *Ars.* have no effect; *Carbo veg.* may also be tried. These two remedies, *Mur. ac.* and *Carbo veg.* sometimes still succeed in saving life even after the patient had been reduced to the last extremities. I give all these remedies in form of a watery solution, a teaspoonful every two or three hours; by this means, if the remedies are adapted to the symptoms, I generally reach my purpose both speedily and gently.

5. **Pneumotyphus and liver-disease.**—The pneumonic symptoms in typhus yield in most cases to the remedies given for other symptoms of typhus, more particularly to *Bry.* and *Rhus t.* If the pneumonic symptoms are so marked that they almost throw all the other symptoms into the shade, and neither *Bry.* nor *Rhus t.* accomplishes any thing, *Phosph.* very often helps, especially if the patient is tormented by a violent racking cough

which is either dry or accompanied by a thick, yellow, tenacious expectoration. If there is a good deal of mucous rale, and the patient is lying in a state of stupor or furious delirium, *Hyosc.* often affords relief; and if œdema of the lungs threatens to supervene during the mucous rale, *Tart. emet.*, *Carbo veg.* or *Phosph.* may be resorted to. If hepatitis supervenes during the course of typhus, and *Bry.*, *Laches.* or *Lyc.* remain ineffectual, *Merc.* sometimes helps as a last resort.

6. **Stage of critical evacuations.**—If, as is not unfrequently the case, the condition of the patient takes a bad turn in this stage, the same remedies that have been mentioned in the preceding numbers will, according to the different symptoms, be found suitable in this stage, only with this difference that *Rhus t.*, *Arsen.*, *Carbo veg.* and *Mur. ac.* will then be found chiefly indicated. If, after the cessation of the critical evacuations, a feverish condition remains, and the patient does not yet experience a full sensation of returning convalescence, and the appetite still delays, I know of no better remedy to remove this condition, than *Cocc.;* if the strength alone is still wanting, *Verat. alb.* may be given for this weakness.

### 3. Remarks concerning the Remedies generally used in Typhus.

1. **Essential anti-typhous remedies.**—These are *Bry.*, *Rhus t.*, *Phosph. ac.*, *Ars.* and *Phosph.*

*Bryonia* is indicated for almost all the symptoms of the first and second periods, until the beginning of intestinal ulceration, including cerebral irritations, inflammations of the thoracic organs, catarrhal complaints, pains in the limbs, etc., unless the symptoms increase in intensity so as to require *Bell.*, *Hyosc.* or *Op.*, (see 2, 4,) as necessary intercurrent remedies. Whether during this inflammatory stage, for which *Bry.* is the main remedy, the tongue is moist or dry; whether the patient is slightly delirious or not; whether the eyes, ears, lips, tongue, lungs or liver, the skin and strength are in one state or another, is immaterial so long as no diarrhœa is present (also except the cases mentioned in 2, 4); it is entirely unnecessary to dwell, for a knowledge of the more particular symptomatic indications, upon symptoms that, after all, are common to every form of typhus.

*Phosphori acidum.*—This is one of the most important remedies which, although it cannot do any thing in the higher grades of abdominal typhus, where a putrid decomposition of the fluids takes place, and *Rhus t.* is infinitely superior to *Phosph. ac.* in combating this symptom; nevertheless it is an indispensable remedy in arresting at the onset the yellow, watery and slimy diarrhœic stools and all further developments of abdominal typhus. It is particularly indicated if the patient, overwhelmed by utter prostration, lies in a state of stupid apathy and absence of sense, is very taciturn and insensible to every external impression, the abdomen is very much distended, the patient is troubled with many gastric ailments and the stools often pass off involuntarily.

*Rhus toxicodendron.*—This remedy is more particularly adapted to the period of incipient and fully-developed intestinal affection, nevertheless it is likewise indicated in the inflammatory stage, if diarrhœa has already set in, or *Bry.* is not sufficient for the tearing pains in the limbs and these pains are felt during rest rather than during motion. If the symptoms of abdominal typhus have set in, and *Phosph. ac.* does not help, *Rhus t.* is very often the only remedy that helps, even if the tongue has become parched, dry brown and hard as wood, and typhomania, with or without muttering, has set in, or whatever other symptoms may characterize this condition together with the bloody and cadaverously-fetid stools.

*Arsenicum.*—A powerful remedy in many cases of abdominal typhus, if *Rhus* remains ineffectual; on the other hand *Ars.* sometimes has no effect whatever if it is given before *Rhus.* In the inflammatory stage with constipation, it is of no real benefit; if we are indiscreet enough to prescribe it for the typhomania and delirium that may set in in this stage, we may do a great deal of injury; this has happened more than once at the hands of rash young colleagues. Its sphere of action really commences where the putrid, foul, cadaverously-smelling stools and the brown, dry leather-like tongue indicate such an advanced degree of decomposition of the fluids that *Rhus t.* is no longer able to arrest it; whether, in such circumstances, the other symptoms connected with such a condition, and with the extreme prostration which is necessarily present, are so or so, is of very little consequence; even muttering delirium may be present, without *Ars.*, being counter-indicated by this symptom.

*Phosphorus.*—In some respects this remedy is no less comprehensive than *Bry.*, and *Rhus t.;* for it not only arrests the diarrhœa in the preliminary stage and diminishes the danger of the whole disease, but it may likewise act in every stage not only as a transitory remedy, but likewise as a remedy that may break the force of the disease itself, as, for instance, if *Bry.* is insufficient for the cerebral irritation as well as the pulmonary difficulties, in which case the united action of *Phosph.* and *Bry.*, will often prove sufficient to arrest the dangerous progression of the fully-developed abdominal typhus. It is likewise efficient in a case of fully-developed abdominal typhus, if *Rhus t.* does not arrest the diarrhœic stools setting in at the outset; or even if the evacuations are gangrenous and bloody.

## 2. The most important intercurrent Remedies.

*Belladonna.*—Although this remedy has it not in its power to moderate the essential course of typhus, and its employment against the comparatively harmless headache at the commencement of the attack would involve a loss of time, yet it becomes an indispensable intercurrent remedy if *Bry.* does not succeed in controlling the inflammatory cerebral irritation; the power of the senses and mental faculties is impaired, the speech is heavy and embarrassed, and the patients no longer recognize their own relatives, or they are carried away by a furious delirium and make attempts to escape out of their beds; likewise, if spasms of the pharynx set in, in which case *Bell.* may still prove useful even in the stage of intestinal ulceration.

*Hyoscyamus.*—This is indicated for furious delirium, if *Bell.* has no effect; it is likewise preëminently indicated in every stage, if the patient is sunk in a state of apathetic stupefaction, remains perfectly unconscious when spoken to or called, and cannot be shaken or roused by any other means from his lethargic condition.

*Calcarea.*—Although Goullon is so far the only one who has recommended this remedy, yet, adopting his advice, I have derived the most satisfactory results from the use of *Calc.* in cases of typhus, if the exanthem was very slow in making its appearance; the change in the symptoms became so favorable that the diarrhœa stopped and, under the action of *Bry.*, the disease ran its course to its final termination without any further untoward symptoms.

*Lycopodium.*—What I have said of *Calc.*, is likewise applicable to *Lyc.*, except that, if the exanthem delays its appearance and diarrhœa sets in, *Lyc.* should only be given after the diarrhœa has been arrested by *Calc.*, whereas *Calc.* can be given whether constipation or diarrhœa is present. *Lyc.* is particularly useful after *Calc.*, if the patient is harassed by muttering delirium, a tearing and stinging headache, and is lying in a state of quiet sopor which is sometimes interrupted by scolding and screaming, and the abdomen is very much distended.

*Nitr. acidum.*—This remedy has likewise been recommended by Goullon; I have used it in more than one case of typhus with a good deal of advantage for intestinal ulceration and hæmorrhage.

*Muriatis acidum.*—This acid is often indispensable if the symptoms of putrid decomposition of the fluids have reached the highest degree of intensity, and the patient is so weak that he settles down in the bed into one heap, with fetid diarrhœic stools, intestinal hæmorrhage, sopor; neither *Carbo veg.* nor *Ars.* or *Nitri. ac.* seemed to have the least influence over this condition.

*Carbo vegetabilis.*—Although this remedy has rendered me excellent service in very bad cases with putrid evacuations, which neither *Rhus t.*, nor *Ars.* or *Phosph.* was able to control, yet it is my opinion that we ought not to repose too much confidence in it. I have treated a case exactly similar to that related by Gross; the patient passed cadaverously-smelling stools and was lying in a state of sopor with rattling breathing and the mouth wide open. *Carbo veg.* seemed to revive him for a couple of hours, but the patient died in twelve hours notwithstanding the remedy was continued all the time. *Carbo veg.* cannot raise the dead any more than any other drug.

### 3. Intercurrent remedies that are less frequently used and have been recommended theoretically

*Aconitum.*—I do not see what this remedy can do in typhus. I have used it upon the theoretical recommendations of others, but have never derived the least benefit from it in typhus, and it is a mere waste of time to employ it only twenty-four hours. Goullon's case in Rueckert's "Klinischen Erfahrungen," Vol. IV. page 689, is not a case of typhus, but of rheumatic fever with

nervous irritation (see the next chapter No. 1, 3), and has been very improperly placed by Rueckert among typhoid fevers.

*Apis.*—Even the introduction to Wolf's statements in Rueckert, Vol. IV. page 691, shows that all subsequent reasonings are theoretical speculations, I might almost say poetical fancies which, together with other symptoms contained in the "General View," pages 801 to 809, are still very much in need of confirmatory evidence, and which Rueckert would have done well to quote with a very big interrogation-point, in order to prevent any one who hurriedly peruses the "General View" from committing a mistake and adhering to uncertain theoretical recommendations in preference to the abundantly verified facts contained in the same article.

*Arnica.*—Sometimes indispensable if the fever sets in with complete stupefaction and involuntary discharges of stool and urine.

*Cancer fluviatilis.*—I have never used this agent. We possess much better remedies, and it can therefore be dispensed with.

*Chamomilla.*—At a time when the true character of typhus was not yet well ascertained, Hartmann's recommendation of Chamomilla in this disease may have been proper; but at the present time nobody will probably want to prefer it even as an intercurrent remedy to other more deeply-acting drugs.

*China.*—The cases mentioned in Rueckert, Vol. IV. page 729, do not seem to belong in the class of typhus; they should have been recorded in the category of gastric fevers.

*Cocculus.*—Hahnemann's remarks on this drug are the best that have yet been made; if typhus threatens to assume a lentescent form, Cocculus is often indispensable.

*Crocus.*—This agent will never be a genuine remedy for typhus; as long as we possess much superior remedies of this class, my advice to homœopathic practitioners is never to lose any time with this drug in typhus.

*Cuprum.*—Whether the case recorded in Rueckert, Vol. IV. page 734, is a case of typhus, remains doubtful, although cases of typhus may occur, where *Cuprum* may act as an intercurrent remedy for cerebral conditions.

*Ignatia.*—It is very probable that, according to Wohlfurth, *Ignatia* may act usefully as an intercurrent remedy in typhus; I infer from his statements that *Ignatia* may prove useful in the

first or erethic stage, where its symptoms are very sharply delineated.

*Lachesis.*—I have employed this agent in several cases, where the diarrhœic stools were preceded by sopor, depression of the lower jaw or muttering delirium, and *Opium* seemed to have no effect upon these symptoms; I am not prepared to say that *Laches.* abbreviated the course of the disease, but rendered it less severe and threatening.

*Mercurius.*—So far I have employed this remedy in typhus only, if the liver was out of order, and the region of the liver and pit of the stomach were very painful; this is all I know concerning the relation of *Merc.* to typhus.

*Moschus.*—I have nothing to say concerning the virtues of this drug in typhus. I believe however with Cl. Mueller that *Moschus* may prove useful in cases of typhus with severe catarrhal symptoms, where, in spite of *Phosph.* and *Tart. emet.*, the mucus accumulates to such an extent that the patient is threatened with paralysis of the lungs and asphyxia.

*Nitri spiritus dulcis.*—In accordance with Hahnemann's recommendation I have given this remedy in two cases of extreme apathetic dullness of sense, without any other symptoms; in subsequent cases, however, where this agent left me in the lurch, and *Hyosc.* helped me out of the difficulty, I have always first resorted to this last-named remedy, which acted so favorably that I was able to dispense with the *Nitre.*

*Opium.*—Eminently appropriate, if the sopor threatens to terminate in paralysis of the brain; if after *Opium*, or after *Laches.*, the fever runs its course through all stages, it is generally much milder and more regular.

*Stramonium.*—If the furious delirium of the inflammatory stage of typhus neither yields to *Bell.* nor *Hyosc.*, *Stram.* may be found an indispensable intermediate remedy, especially if the frightful phantasms seem to start out of the ground by the patient's side.

*Veratrum.*—Likewise an excellent intermediate remedy if even in the first or inflammatory stage the vitality sinks to the lowest degree, with paroxysms of syncope, bluish redness of the face and a feeble and intermittent pulse.

*Zincum.*—I have never employed this remedy in typhus, and am therefore unable to decide how far this agent, which Hirschel

seems to have employed with good effect in typhus, deserves further attention.

### 4. Synopsis of special Indications for the Selection of Remedial Agents in Typhus.

According to my observations so far, the following indications have proved decisive for the selection of the subsequently mentioned remedial agents.

1. **Disturbances** of the **functions and organs of sense.**—For **apathetic dullness of sense** and insensibility to external impressions (febris nervosa stupida), *Hyosc.*, *Phosph. ac.*, *Carbo veg.*, *Bell.*, *Rhus t.;* for continual **sopor,** *Opium*, *Laches.;* for furious, **frantic delirium,** with disposition to escape, *Bell.*, *Hyosc.*, *Opium*, *Stram.;* for mild or **bland** delirium, *Bry.;* **muttering** delirium, *Laches.*, *Lyc.;* for continued **sleeplessness,** *Bry.*, *Bell.*, *Phosph.*, *Rhus t.;* for tearing-jerking **headache,** *Bry.*, *Rhus t.;* **flushed** face during the delirium, *Bell.*, *Op.*, *Hyosc.;* **bluish** face, *Verat. alb.;* **hippocratic** face, *Ars.*, *Carbo veg.*, *Phosph. ac.*, *Verat. alb.;* **sooty** appearance around the mouth and nostrils, *Hyosc.*, *Verat. alb.;* **hæmorrhage** from the mouth and nose, *Phosph.*, *Phosph. ac.*, *Rhus t.*, *Carbo veg.*, *Ars.*

2. **Symptoms** of the **digestive range and organs.**—If the **tongue** is still **moist,** *Phosph. ac.;* **thickly coated,** *Bry.*, *Rhus t.*, *Carbo veg.*, *Nitr. ac.;* **red** tongue, *Phosph.;* **parched, brown,** dry and hard tongue, *Rhus t.*, *Ars.*, *Mur. ac.;* almost **paralyzed,** *Rhus t.*, *Ars.*, *Carbo veg.*, *Mur. ac.;* **ulcers in the mouth,** *Mur. ac.*, *Ars.*, *Carbo veg.;* **gastric** symptoms (nausea, eructations, vomiting), *Bry.*, *Phosph. ac.*, *Rhus t.*, *Hyosc.*, *Verat. alb.;* **liver-complaint,** *Bry.*, *Lyc.*, *Merc.;* **enlargement of the spleen,** *Bry.*, *Phosph. ac.*, *Arsen.*, *Rhus t.;* **pains in the stomach** and pit of the stomach, *Bry.*, *Rhus t.*, *Merc.;* great **distention** of the **abdomen,** *Phosph. ac.*, *Rhus t.*, *Ars.*, *Carbo veg.;* **constipation,** *Bry.*, *Calc.*, *Lyc.;* **diarrhœa,** *Phosph. ac.*, *Calc.*, *Nitr. ac.*, *Rhus t.*, *Phosph.*, *Arsen.*, *Carbo veg.*, *Mur. ac.;* **slimy,** watery diarrhœa, *Phosph. ac.*, *Rhus t.*, *Calc.;* consisting of **green mucus,** *Nitr. ac.;* putrid, blackish-brown, cadaverously-smelling, *Rhus t.*, *Ars.*, *Carbo veg.*, *Phosph.*, *Mur. ac.;* **bloody,** *Phosph.*, *Ars.*, *Mur. ac.*,

*Nitr. ac.*, *Rhus t.*, *Carbo veg.;* **involuntary** stools, *Phosph. ac.*, *Rhus t.*, *Arsen.*, *Carbo veg.;* **involuntary** discharge of stool and urine, with congestive stupefaction, *Arnica.*

3. **Respiratory Organs.**—Catarrhal affection of the mucous lining, *Bry.*, *Rhus t.*, *Phosph.*, *Hyosc.*, *Tart. emet.* Dry cough, *Bry.*, *Phosph.;* expectoration of tenacious mucus, *Phosph.;* **mucous rale,** with danger of asphyxia, *Carbo veg.*, *Tart. emet.*

4. **Extremities and Strength.**—Severe **tearing** in the extremities, *Bry.*, *Rhus t.*, *Lyc.;* **spasms,** *Bell.*, *Hyosc.*, *Calc.;* the strength sinks to the **lowest degree** in the first days, *Bry.*, *Phosph. ac.*, *Phosph.*, *Rhus t.*, *Arsen.;* **settling** down in the bed, *Mur. ac.;* **red** rash, *Phosph. ac.*, *Rhus t.;* **delaying** appearance of the exanthems (sudamina and petechiæ), *Calc.*, *Lyc.* Signs of extreme decomposition of the fluids, **febris putrida,** *Rhus t.*, *Ars.*, *Carbo veg.*, *Mur. ac.*, *Verat. alb.;* **Ecchymoses** under the skin, *Rhus t.*, *Ars.*, *Carbo veg.*

P. S. The symptoms relating to the pulse, fever and perspiration, disappear side by side with the other symptoms; they can never decide the selection of a drug any more than the petechiæ, the white miliaria and the peculiar urine, for the reason that all these symptoms depend upon the other previously-mentioned conditions, more particularly the exanthemata that are present in every form of typhus, indeed, unless they are present, the disease cannot run a regular and safe course.

## CHAPTER XXXV.

## VARIOUS KINDS OF FEVER AND MORBID SWEATS.

### 1. Various Kinds of Fever.

1. **General Remark.**—Except intermittent and typhoid fevers, modern French pathologists do not accept any other idiopathic fevers; they refer the so-called inflammatory fevers to some local inflammation, regard the so-called gastric and bilious fevers as varieties of typhus, and rheumatic fevers as belonging to the sphere of acute articular rheumatism. Practically this classification may be correct in many cases, for a strict examination shows that these fevers are very often mere symptoms of the local affection, and disappear with the subsidence of the latter. Nevertheless I have met with cases where, especially among children, no other trouble could be discovered than the fever, or where, as in intermittent and typhoid fevers, the local affection only developed itself in the course of the fever and did not disappear again until the fever ceased, showing that such cases originate in a constitutional disturbance of which the local affections are mere symptoms, but not by any means the cause of the fever. In the following numbers I shall try to indicate in sharp outlines the diagnostic signs which distinguish the fevers I have had to treat, from similar local diseases or typhoid forms, more especially since, in Rueckert's collection, more than one case may be found that deserves any other name rather than that of typhus. As a rule, essential fevers are distinguished from symptomatic fevers by the circumstance that in the former the fever is a permanent phenomenon, during the course of which the local symptoms supervene and can be removed by treatment without the fever ceasing on this account; whereas in symptomatic fevers the patient first perceives the local inflammation, during the course of which the fever makes its appearance, which afterwards disappears during the treatment before the local inflammation is removed. The same distinction prevails in some respects between typhoid and non-typhoid fevers.

Nervous symptoms may set in during the course of the latter, yet they do not constitute essential characteristics of these fevers, but merely consecutive phenomena. This is evident from the absence of the essential symptoms of typhus, such as the disproportionate prostration, the constant tendency to lie on the back, the characteristic apathy and dullness of sense. In the non-typhoid fevers these symptoms never manifest themselves as promptly as in real typhus. Moreover, whatever other symptoms may set in in the course of non-typhoid fevers, yet the genuine typhomania, the peculiar rumbling in the ileo-cœcal region, and the hypertrophy of the spleen (which likewise occurs in intermittent fevers) never occur in this class of fevers. To these characteristic symptoms of typhus may be added the peculiar petechiæ of this disease, which are entirely distinct from the small hæmorrhagic spots of rheumatic peliosis. We shall dwell more fully upon these distinctions in the subsequently-described forms of fever, among which the so-called brain-fever, the inflammatory, rheumatic, gastric-bilious and mucous fevers deserve special mention.

2. *a.* **Brain-fever.**—These fevers which the French describe under the name of fièvres cérébrales, I have met with more frequently among children and young people, much less frequently among adults; notwithstanding French pathologists number them among inflammations of the brain or typhus, and most kinds of brain-fever most likely do belong to one or the other of these conditions; yet I have met with cases of brain-fever that could not have been attributed either to typhus or meningitis. If the symptoms of acute meningitis, such as heat chiefly about the head, transitory flushes of the pale face, expressions of distress during the paroxisms of headache, almost uninterrupted vomiting, obstinate constipation, spasmodic rigidity of the upper extremities, were absent; and if, in the place of these symptoms, we had dryness and burning heat of the skin, continual headache and an apathetic expression of the countenance, scarcely any vomiting but diarrhœa alternating with constipation; yet typhus could not have been diagnosed in such a case, because the most important symptoms of this disease were wanting, such as the pain on pressure in the ileo-cœcal region, the enlargement of the spleen and the petechiæ, so that, in order to save my diagnosis, I had to take refuge behind a simple form of brain-fever which was neither meningitis nor typhus cerebralis. It

is very likely that these fevers, especially in the case of little children, depend upon helminthic irritations, or in the case of larger children, upon some exanthematic irritation of the brain and abdomen occasioned by an eruption that did not make its appearance upon the skin. In a case of brain-fever of this kind with the most violent cerebral symptoms, which I had been treating for upwards of a fortnight, every symptom disappeared suddenly as by magic when, after the exhibition of *Cupr.* which I had prescribed solely for the cerebral symptoms, measles suddenly and unexpectedly broke out in full bloom. In such fevers the brain is undoubtedly the irritated organ, since, in the case of children, these fevers commence with the same symptoms as acute hydrocephalus. The little patients become fretful and restless, change color very frequently, bore in their noses as though the trouble arose from worms, until, after a short chill, they are all at once attacked with a burning heat, and violent stitches which dart through the head and are speedily followed by stupor and furious delirium, and sometimes even convulsions. In the case of young adults these fevers likewise set in with a violent headache, and even if no spasms supervene, yet the stupor and delirium are seldom absent; in the further course of the fever the muscular weakness and the vertigo increase to a high degree, and the catarrhal symptoms with which these fevers sometimes set in in the case of adults, likewise increase so as to threaten asphyxia by paralysis of the lungs. If the patients do not succumb to this kind of asphyxia, nor to nervous apoplexy, they frequently perish by oft-repeated paroxysms of eclampsia, or by exhaustion occasioned by the frequent and colliquative diarrhœic stools which set in towards the end of the fever. These stools never assume a putrid or bloody character, but are always slimy or watery, and finally pass off involuntarily, amid considerable distention and painfulness of the abdomen to contact. What distinguishes these fevers preeminently from typhus is that they can be cut short in their course at any moment by the appropriate remedy, which is impossible in a case of typhus; and that *Acon.*, which is never of any use in genuine typhus, will sometimes, if given at the onset cut the whole disease short in less than 24 hours. *Bell.*, *Hyosc.*, *Opium* and *Laches.*, and no less *Cupr.*, are likewise remedies for brain-fever, which are always employed with success if given in accordance with the indications given under "*nervous fever* or *typhoid fever*,"

Chap. XXXIV. No. 4, 3 and 4. One of the chief remedies in this fever is *Cina*, if the patients vomit a good deal, although their tongues are clean, and likewise *Verat. alb.*, if the patients are troubled with catarrhal difficulties, if they are anxious, restless and inclined to start, with moaning, crying and exclamations during sleep; or even if they are lying in a state of apathy, muttering delirium and bluish-redness of the cheeks. If these fevers are accompanied by severe pains in the limbs, like rheumatic pains, *Acon.*, *Bry.*, *Rhus t.* and *Lyc.* are often very useful; and if diarrhœic stools are present, *Calc.* or *Rhus t.*, not only as intermediate remedies, but as remedies that will sometimes remove the whole trouble at one blow. If the pulse is frequent, but not small and feeble like a *veratrum*-pulse, *Acon.* will prove one of the best remedies for the alternate stupefaction with great restlessness and bland delirium, together with frequent twitchings and starting as if in affright. In very many cases I have observed such fevers during the prevalence of influenza among persons who had been attacked with it, either as terminations or sequelæ of this epidemic, not only among children, but likewise, although in a less degree among adults.

3. *b.* **Inflammatory fevers.**—I have noticed these fevers in the case of children, even outside of the period of dentition, without the least sign of a local affection being discoverable, not even the sensitiveness of the vertebral column to hard pressure which I fancied I had noticed in similar circumstances in the case of adults, so that I felt unable to attribute these fevers in other cases to any other cause than arterial vascular irritation. It is so much more impossible to confound these fevers with the inflammatory stage of typhus, as the former set in suddenly without any precursory symptoms, a short chill being succeeded by a continuous, burning heat, and the whole complex of their symptoms bearing only the imprint of a high degree of nervous and vascular excitement, without ever exhibiting the **nervous prostration** of typhus. The chief remedy for these inflammatory fevers is *Acon.* in the form of a watery solution which almost always appeases the vascular tumult in less that 24 hours, especially if the skin is dry and hot, and the patient is troubled with great restlessness and difficulty of breathing. *Coff.* is likewise excellent, if the patient is fretful, exceedingly sensitive and sleepless; more particularly in

the case of children, if they cry a good deal, can only be quieted by being carried, and still remain very hot after perspiration has broken out, and twitch and start a good deal during sleep. If convulsions threaten to supervene, *Ipec.* or *Bell.* helps, unless *Coff.* or *Cham.* had anticipated this change.

4. *c.* **Rheumatic fevers.**—These fevers are distinguished from acute rheumatism by the circumstance that not a single limb or joint is invaded locally, and that more or less severe wandering pains dart through the limbs both during and between the exacerbations of the fever. Here too, where, during the severe fever-heat, cerebral symptoms, such as sopor, stupor, delirium, etc., are apt to develop themselves, they might be mistaken by a superficial observer for the beginning or the first stage of genuine typhus, if not the utter absence of all signs of typhus, such as typhomania, the disproportionate prostration and the petechiæ which generally make their appearance on the fourth day, made every mistake impossible, unless we were to imitate Rueckert's method of classing every case of fever with nervous symptoms, among true typhoid fevers. The fever, in such cases, has always a more or less inflammatory character, with violent heat towards evening, and a profuse, not alleviating perspiration over night. This fever very often sets in with heaviness and weariness in the limbs, vertigo and a violent headache, which sometimes exhausts the patient a good deal; and very often a dry cough and pulmonary congestions supervene, attended with dryness of the mucous membrane of the nose and eyes, which are sometimes very painful. These fevers occur most frequently in the winter-season, but I have likewise met with them during or after the prevailing influenza, with which they are sometimes associated. The chief remedy in many cases of these fevers is *Acon.* which, if not always sufficient to remove the whole disease, transforms it so that *Bry.*, *Rhus t.*, *Lyc.*, *Merc.* or *Nux v.* and likewise *Verat. alb.*, *China.*, *Bell.*, easily wipe out the remainder. That these fevers often originate in some inflammatory irritation of the spine, has become a certainty in my mind; be this however as it may, the presence or absence of painfulness of the vertebral column to hard pressure, does not modify in the least the selection of the appropriate remedy. If *Acon.* which, like every other remedy in this fever, is to be given in form of a watery solution, does not control the fever entirely, *Bry.* will then often come into play,

especially if the pains increase during motion, and the dry cough, which often torments the patient, had not yielded to *Acon.;* or *Rhus t.*, more especially if the pains attack more particularly the back and small of the back, for which *China* is likewise indicated, are worse during rest, and the nocturnal heat is associated with a drawing in the limbs, obliging the patient to stretch them, and if the cough is likewise very racking and exhausting. If the pains are especially severe at night, drawing and tearing, with profuse sweats that afford no relief, and if the joints, limbs and head are particularly invaded by the pains, *Merc.* helps in most cases, whereas, if these sweats are accompanied by a lancing drawing and tearing in the small of the back, back and thighs, *China* is much more efficacious. If the pains attack more particularly the nape of the neck, shoulders and upper arms, *Bell.* is the best remedy, especially if these pains are associated with signs of cerebral irritation, in which case *Bry.* sometimes renders eminent service. In these fevers I have employed *Cham.* with great advantage, if the pains which are particularly severe at night, lame the limbs, pass into the head, limbs and teeth, are alleviated when the patient sits up in bed and compel him to constantly turn about. If the patients feel at the same time very languid and feeble and the pains can be relieved by the application of warm clothes, or in a warm temperature generally, *Ars.* sometimes affords great relief. If the pains are most violent in the chest, between the shoulders and in the small of the back, *Nux vom.* is most generally the best remedy; or, if the pains shift rapidly from one locality to another, *Puls.;* and for tearing and stinging headache which is particularly worse in the afternoon and at night, *Lyc.* If the continued and profuse perspiration is succeeded by great weakness, *China* is a sovereign remedy, likewise *Verat. alb.*, if the patient is troubled with a good deal of dry cough and diarrhœic stools, for which *China* had been given without effect. At the commencement of the treatments I always prescribe my remedies in form of a watery solution, three globules of the thirtieth attenuation; afterwards, if the treatment becomes protracted, I mostly give the medicines dry on the tongue, allowing each remedy to act at least 48 hours before making a change in my prescription. I pursue this course for the reason that these fevers often last 14, 21 or even 42 days. If the pains threaten to shift to the heart or the cerebral meningæ (which they are more inclined to do in these fevers than in firmly-local-

ized rheumatic inflammations), I again give the appropriate remedies (*Acon.*, *Bry*, *Ars.*, *Phosph.*), in the form of watery solutions.

5. *d.* **Simple mucous fevers.**—As we have simple as well as typhoid meningitis, pneumonia, affections of the intestines etc., so we have likewise simple as well as typhoid mucous fevers. These fevers, which generally set in with a very lentescent type, and which, during their whole course, are without the alvine evacuations, or the pain in the ileo-cœcal region and the hypertrophy of the spleen peculiar to typhus, have been observed by me, no less than rheumatic fevers, most frequently subsequent to, or during the prevalence of influenza, and sometimes as a spontaneous disease in cold and wet summers, when scrofulous children or females were more especially liable to attacks of this fever. If the fever succeeded an attack of influenza, it was generally preceded by a protracted catarrhal expectoration from the bronchia, in addition to which some fine day vomiting of mucus suddenly set in, together with more or less headache, tongue coated with white mucus, straw-colored urine, and a moderate fever consisting of nocturnal dry heat and almost constant chilliness during the day. If the disease which, unless cured, sometimes ran a course of two or three weeks, continued to progress, the tongue assumed a more dark-red color and appeared cleansed along the edges, and very frequent diarrhœic stools often set in, consisting of mucus and sometimes mixed with undigested food and bile, or even with blood and attended with tenesmus. These diarrhœic stools exhausted the patients, so that they were no longer able to leave their beds. But if these fevers lasted ever so long, not one of the above-mentioned symptoms of typhus ever made its appearance; but all my patients without an exception, were troubled with frequent hawking or gagging up of a thick, tenacious, ropy mucus. If the disease set in spontaneously, the mucous lining of the stomach generally constituted the irritated organ, whence the affection commonly spread to the intestines and bladder, before the bronchial mucous membrane was invaded, which, however, never came off scot-free. After the disease has run a long course and has been improperly managed, aphthæ may form, with an exceedingly fetid odor from the mouth; these aphthæ not only line the buccal mucous membrane, but likewise the stomach and intestinal canal, with cadaverously-smelling, green-slimy evacuations.

If these are not speedily arrested, they sometimes assume a gangrenous character, after which, as in every other disease terminating in gangrene, all sorts of nervous phenomena, such as buzzing in the ears, hardness of hearing, painful cloudiness of the head, muttering delirium, subsultus tendinum and grasping at flocks may supervene, without, however, being attended with the properly characteristic symptoms of typhus, such as petechiæ, pain in the ileo-cœcal region and enlargement of the spleen; those patients even, who succumb to the formation of aphthæ and their gangrenous destruction, die without any of the above-mentioned symptoms of typhus making their appearance. White miliaria, however, are not an unfrequent occurrence, but being occasioned rather by the exhausting sweats which sometimes break out, this exanthem is of no more consequence than any other kind of rash breaking out after profuse perspiration generally. It is only if the miliaria do not come out, or recede again after having been out, that the patient runs great risk and that sopor and a fatal paralysis of the brain may set in as a consequence of this retrocession. Except this, the prognosis in these fevers is not unfavorable; many cases run their course without the interference of art, somewhat slowly, but generally more safely and with less danger than if the mucous membranes had been irritated by powerful drastics. But even after gangrenous aphthæ have already set in, *Ars.* affords every possible help in most cases provided it is given in season; whereas, if no gangrene has yet set in, *Merc.* triumphs over the aphthæ even if the whole expanse of the mucous lining had already been covered by them; and if *Merc.* should not remove them entirely, *Sulph.*, *Phosph.* and *Calc.* will then wipe out the rest. My chief remedies in this fever, of which I give two or three doses a day in water, even if no aphthæ are present, are *Puls.*, *Merc.*, *Sulph.*, *Calc.* and *Ars.*, and only in a few cases (see diarrhœa, Chap. XV.) I have to call in aid *China*, *Caps.*, *Rheum.* and *Verat. alb.* As a rule I commence the treatment of these fevers with *Puls.* or *Merc.*, after which I give *Sulph.*, and continue this remedy as long as it improves the case. *Bry.*, *Cham.*, *Ignat.*, *Amm. mur.*, *Dulc.* and *Sen.* have been recommended in these fevers, but I have never seen any great effects from them, nor from the much-vaunted *Digit.*, *Ant. cr.*, *Tart. emet.*, *Cina*, *Bell.*, *Sulph. ac.*, *Sepia*, *Rhus t.*, *Spigel.* and *Mez.*

6. *c.* **Gastric and bilious fevers** (febres saburrales).—In more than one hot summer I have seen these fevers prevail without any signs of typhus, sometimes even associated with summer-complaint and dysentery. Of course, after having been treated for a long time with emetics and purgatives, they are apt to assume a torpid character and to exhibit nervous symptoms, such as, a meteoristic distention of the abdomen with constant retching; a dry, brown-coated tongue, cold extremities, a quick and piliform pulse, a brown urine with a thick cloud floating near the surface, involuntary urinary and alvine evacuations, sopor, muttering delirium and finally paralysis of the abdominal ganglia and the brain. But these symptoms are not different from those that are observed in many other diseases without having the least thing in common with typhus, and yet end with decomposition of the vital fluids, such as, inflammatory dysentery leading to ulceration of the intestines; gangrene of the liver, uterus or lungs, absorption of pus etc. In order to range gastric and bilious fevers in the class of typhus, simply because they exhibit nervous symptoms, it would be necessary to show that the three chief characteristics of typhus, the characteristic alvine evacuations, the hypertrophy of the spleen and the pain in the ileo-cœcal region, constitute essential symptoms of these fevers; whereas they do not even appear when the patients are in articulo mortis. It is true that, when the gastric derangement is very marked, the fever may set in with severe headache; but this headache does not, as in typhus, consist in a painful pressure in the forehead and occiput, but in a pressing ache in the frontal and orbital regions; at the same time such gastric symptoms as bloating of the stomach, pressure at the stomach, eructations, disposition to vomit or vomiting of the ingesta and bile, a dirty-yellow coating of the tongue and fetid evacuations containing badly-digested food, make the patient fancy that he has simply deranged his stomach. Yet the feeling of weakness connected with these symptoms, and the distressed and haggard appearance, together with the fever, are evidence that there is something more before us than a simple derangement of the stomach, and that the symptoms constitute a case of **gastric fever.** It is still more difficult to confound the so-called bilious fevers with typhus; for in their case the bilious vomiting and stools, the jaundiced complexion and the dark-brown urine with a greenish tint, together with the violent inflammatory fever might induce a belief that we have to

deal with hepatitis or acute jaundice; but the slight painfulness of the liver which is in no proportion to the febrile heat, together with the marked sensation of pressure and fullness in the region of the stomach, and more particularly the copious evacuations by the mouth and rectum exclude the idea of jaundice and hepatitis insofar as in both these conditions we have constipation or a discharge of hard, gray, clayey stools with retching rather than, as in bilious fever, copious yellow, green and brown stools; whence it is evident that in this case the symptoms point to a functional derangement of the digestive process rather than to a local affection of some definite organ. Be this as it may, I can assure every homœopath that he will never accomplish anything with *Acon.* in purely gastric fevers without bilious symptoms, but that in these fevers, in accordance with the special indications to be found in Chap. XI. under the head of "gastric complaints," the main remedies are: *Puls.*, *Nux v.*, *Ipec.* and *Ars.*, although *Ant. cr.*, *Bry.*, *Tarax.*, *Tart. emet.* and *Sep.* are sometimes very useful; and, if **rheumatic** pains are likewise present, *Bry.*, *Cham.*, *Nux v.*, *Puls.* The case is different with bilious fevers. If there is much febrile heat, *Acon.* is often very serviceable in these fevers, likewise *Cham.*, *Bry.*, *Nux v.*, *Bell.*, *Merc.*, *China* and *Verat.* In particular cases, if there is much **vertigo,** *Nux v.*, *Bry.*, *Cham.*, *Bell.;* for violent **headache,** *Bry.*, *Nux v.;* a good deal of **vomiting,** *Ipec.*, *Tart. emet.*, *Nux v.*, *Arsen.;* severe **pains in the stomach,** *Bry.*, *Arsen.*, *Nux v.*, *Verat. alb.;* **constipation,** torpid stool, *Bry.*, *Nux v.*, *Verat. alb.*, *Ars.;* **diarrhœa** or more frequent stools, *Puls.*, *Cham.*, *Merc.*, *Arsen.;* **colicky** pains, *Cham.*, *Merc.*, *Verat. alb.;* **sleeplessness** or bad sleep, *Bell.*, *Nux v.*, *Cham.*, *Ars.;* **chilliness,** *Puls.*, *Nux v.*, *Merc.*, *Bry.;* burning **dry** heat, *Acon.*, *Bry.*, *Cham.;* **absence of thirst,** *Puls.;* intense **thirst,** *Acon.*, *Ars.*, *Cham.;* **desponding** mood, *Cham.*, *Verat. alb.*, *Acon.;* **hypochondriac** mood, *Nux v.*, *Bry.*, *Verat. alb.* Finally, if the fever is caused by chagrin, *Cham.*, *Bry.*

7. *f.* **Worm-fever.**—Modern French pathologists deny the existence of these fevers, like many other things, and trace all diseases of the brain in the case of children to inflammation of the brain or typhus. What Dr. Maly (Hygea, Vol. I. page 500) says concerning the existence of worm-fevers and their resemblance to cerebral typhus, has my fullest acquiescence; for I am certain that many of the fièvres cérébrales spoken of above in No. 2,

originate in nothing else than in helminthic irritation, but do not believe, on this account, that such an irritation is the sole cause of those brain fevers; for, as I said before, I have likewise noticed them in young people who were not infested with worms, and in whom these fevers were caused by delaying or suppressed exanthems. I have seen worm-fevers commence even with catarrhal symptoms. Dr. Maly will undoubtedly agree with me that there is a cerebral fever which, even though it should be caused by worms, has no more in common with true typhus than with the meningitis of children and that, whenever such brain fevers turn up, it behooves us to investigate their particular nature with special attention (see above No. 2). In these worm-fevers which Dr. Maly describes with so much correctness that the picture he gives of them, has afforded me as much pleasure as I should have experienced if I had met an old friend, I have always given *Acon.* and *Merc.* with a good deal of success. Most likely I have removed many an helminthic irritation with *Bell.* without knowing it, supposing it to be a symptom of brain-fever, a circumstance which again shows that homœopaths may differ regarding the supposed cause of the disease, but will nevertheless select the same remedy if guided by symptomatic indications. In these fevers I always give the medicine in form of a watery solution, a few doses a day, and the success I have achieved has always been unusually rapid and satisfactory. In most cases where the fever evidently depended upon the presence of worms, I have been able to subdue it in 24 hours, although the other complaints would sometimes last much longer. If the fever is accompanied by a good deal of retching and the children's eyes are surrounded by blue margins, I very often give *Ipec.* with the best result, although *Cina* has, as well as *Ipec.*, "vomiting with a clean tongue" as a characteristic symptom. *Cicuta* and *Silic.* are likewise valuable remedies in worm-fevers; *Cicuta* is especially indicated for the spasms, unless *Cina* arrests them very speedily; *Silic.* is particularly useful to scrofulous children. Worms may occasion far different and worse accidents than mere fevers with symptoms of cerebral irritation. In the *Dictionnaire de Médecine en* 35 *Volumes*, (first edition, Vol. 21, page 244,) Guersant relates the case of a child who complained only of slight pains in the bowels, and was suddenly attacked by convulsions which terminated fatally. A post-mortem examination did not reveal the least symptom of a

morbid alteration in the brain, the medulla oblongata, or the thoracic and abdominal viscera. Two large lumbrici had lodged in the cystic duct, thus causing an obstruction to the passage of the bile. Mondière speaks of a child that had dysenteric diarrhœa, on the ninth day of which a violent intestinal hæmorrhage set in quite suddenly, of which the patient died in 24 hours. A post-mortem examination showed no ulcers in the colon; a simple inspection of the intestines showed that the hæmorrhage proceeded from the duodenum where, at the origin of the intestinal canal, an arterial, firmly-adhering coagulum was seen, and it was evident that the hæmorrhage arose from the rupture of a small artery. At the same time the duodenum was found very much distended by a large ball of lumbrici lying immediately above the coagulum, and several other balls in the ileum, the mucous lining of which was sound throughout its whole extent, so that the only method of accounting for the hæmorrhage was that the worms, by gnawing through the walls of the intestine, had wounded the arterial twig. That worms can enter the respiratory organs (larynx, tracheæ, rima glottidis) is well known and abundantly corroborated by facts; who knows whether spasm of the glottis is not often caused by worms that had found a lodgment in the neighborhood. The frequent presence of eclampsia in such spasms of the glottis, does not exclude the possibility that worms may have been the primary cause of the spasm, since it is precisely worms that constitute one of the chief causes of infantile convulsions. The fact that I have so often effected a speedy cure of spasm of the glottis by means of *Acon.*, seems to contradict the worm-theory. It would be necessary to ascertain whether spasms of the glottis affect principally children that are known to have worms. This is a supposable case for the reason that the sudden and spontaneous appearance of this spasm cannot well be accounted for upon any other ground in cases where no signs of inflammation are apparent.

8. *g*, **Yellow Fever.**—Not having resided in localities where this fever prevails, I have of course no personal experience in the treatment of this epidemic. A captain of a vessel who was well acquainted with homœopathy and had frequently been in the midst of a yellow-fever epidemic, gave me a very full description of the disease and its symptomatic manifestations, for which I recommended to him the following course of treatment: 1, At the

onset, if the first chill is felt, with paleness of the face and a feeling of syncope, *Verat. alb.;* 2, if the heat has set in, with violent, tearing pains in the head and limbs, *Acon.*, and if this does not produce any change within six hours, *Bry.*, or, if violent delirium sets in, *Bell.;* 3, for simple vomiting, *Ipec.;* for the black vomit, *Ars.* and *Phosph.;* 4, if the strength is entirely prostrated, with sleeplessness, suppression of the respiration, constriction of the œsophagus, and burning heat in the stomach, *Ars.* or *Carbo veg.;* 5, for thirst with aversion to liquids, *Bell.;* 6, for hæmorrhages, with black crusts on the tongue and lips, *Rhus t.*, *Ars.* Four years after this, I saw my captain again, who told me that he had again passed thorugh one epidemic in Vera Cruz, and another in Barbadoes, in both of which he had given *Acon.*, *Bell.* and *Bry.* in the first stage, *Ipec.* for simple vomiting, and *Ars.*, very seldom *Phosph.*, for black vomit; by this means he and his friends had saved hundreds of patients. In some cases *Crotalus*, given at the commencement of the attack, had seemed to him to annihilate the disease. In all cases, *Acon.* and *Bry.*, given during the incipiency of the hot stage, diminished the disease so far as to keep off the black vomit entirely; only some mucus was vomited, which was soon arrested by *Ipec.* After this, the whole disease was conquered. Relapses consequent upon dietetic transgressions were very bad; in such cases the disease generally broke out again in all its fierceness, and unless *Ars.* could be given at once, the patient soon fell a victim to his indiscretion. In very many cases *Ars.* even then saved human life. He always gave the thirtieth attenuation, three globules in water; he obtained his medicines from the pharmacy of the brothers Catellan of this city.

## 2. Morbid Sweats.

1. **General Sweats.**—If sweat breaks out in disease, it does not require any particular consideration, unless it happens to be one of the most prominent symptoms, in which case it may constitute an important indication for the selection of a remedy. A profuse perspiration, for instance, which affords no relief, indicates *Merc.* or *China;* exhausting night-sweats in the case of persons that had become weakened by disease or other causes, require *China*, *Carbo veg.*, *Sulph.* or *Verat. alb.* Individuals who

perspire too much and from the least exertion, are benefited by *Hepar, Sep., Sulph.*, or large-bellied individuals by *Calc.*, and, if mental exertions are apt to excite perspiration, *Sulph.* or *Hep.* is advisable. For sour perspiration I have so far used with most benefit *Sulph., Sep., Silic., Lyc.;* for a greasy perspiration, *Bry., Merc.;* for a perspiration that stains the linen yellow, *Merc., Carbo an., Graph.*

2. **Partial Sweats.**—Individuals who perspire particularly about **the head** and in the **face,** are very often benefited by *Verat. alb., Cham., Bry., Carbo veg., Silic.;* for excessive perspiration on **sexual organs,** *Sulph., Sep., Silic., Hep.;* in the **axillæ,** *Hep., Sep., Petrol.;* for **sweaty** hands, *Sulph., Calc., Sep., Hep.;* for an excessive and fetid perspiration on the **feet,** *Silic., Calc., Sulph., Lyc., Carbo veg., Sep., Cupr., Baryt., Graph., Kali carb.*, and if this perspiration **smells very badly,** *Silic., Baryt., Kali carb., Sep., Nitr. ac., Graph.;* if it **excoriates** the toes, *Graph., Carbo veg., Nitr. ac.*

3. **Suppressed perspiration.**—For complaints arising from the suppression of a general perspiration, the following remedies help: *Acon., Cham., Bry., Rhus t.* and *Sulph.* The chief remedy for suppression of sweat on the feet is *Silic.;* sometimes the following remedies help likewise: *Cupr., Baryt., Ars., Rhus t., Sepia.*

## CHAPTER XXXVI.

## A FEW SPECIAL MORBID CONDITIONS.

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### 1. States of Exhaustion and Debility.

1. **After severe diseases.**—Although weakness generally only constitutes a symptom which disappears of itself after the disease is cured, yet there are states of weakness which constitute the whole disease; for instance, after excessive bodily or mental exertions; after excesses, long watching, after some severe illness; in such circumstances it is not only possible but proper to interfere with the resources of art. As regards weakness after a severe illness, when attended with profuse night-sweats, a proper remedy is *China* or even *Merc.;* if the patients are troubled with constant sleeplessness, *Sulph.*, *Coff.*, *Bell.* or *Laches,;* if the patients do not recover their regular **appetite,** *Sulph.*, *Hep.*, *Laches.* or *Antim. cr.*; if the **legs ache** from the least exertion, *Ars.*, *Natr. mur.;* if the least exertion **prostrates** one, *Natr. mur.*, *Cocculus.*

2. **After excessive bodily exertions.**—For **exhaustion** caused by great exertions of the limbs by walking, labor, or by any great expenditure of muscular power, the chief remedy is *Ars.;* if the muscles feel bruised to the bone, *Arnica* helps, taken internally, not to be used externally; a tingling pain in the limbs **as from weariness,** with great lassitude when standing, requires *Natr. mur.*; if exhausted even by **talking,** *Coccul.;* if exhausted even unto **fainting,** *Verat. alb.*, *Cocc.* or *Calc.;* if **joints** are painful as if bruised, with relief with moderate exercise, *Rhus t.;* for **splenetic stitches** after running fast, *Arn.* or *Bry.;* for **pain in the small of the back,** after carrying a heavy load, *Rhus. t.*, *Bry.*, *Sulph.* or *Calc.;* for **shortness of breath** after bodily exertions, *Ars.*, *Acon.*, *Silic.;* for **palpitation of the heart** after an exertion, or when felt after every effort, *Acon.*, *Ars.*, *Natr mur.;* for **headache** after an exertion, *Arn.*, *Bry.*, *Rhus. t.*, *Calc.;* if the pain in the affected parts is excited by

every **motion**, *Bry.*; if the limbs are so **stiff** that they can scarcely be moved, *Arn.*, *Sulph.*; if the **least exertion** again causes great prostration and a feeling of weariness and lassitude, *Laches.*, *Ars.*, *Natr. mur.* and *Petrol.*

3. **After mental labor and watching at night.**—The chief remedy for exhaustion from mental labor is *Nux v.*; if this is not sufficient we may resort to *Sulph.*, *Calc.*, *Silic.*, *Natr. carb.*, *Laches.* and *Puls.*; for **headache** coming on again after every mental effort, and for which *Nux v.* and *Sulph.* are not sufficient, *Calc.*, *Natr. carb.*, *Bell.*, *Puls.* or sometimes *Silic.* may help; for a **sensation of intoxication**, dizziness, *Nux v.*, *Laches.*, *Puls.*, *Rhus t.*, *Silic.*; in the case of persons leading a **sedentary life**, particularly, *Nux v.*, *Sulph.*, *Cocc.*; for **exhaustion** from **watching at night**, chiefly *Cocc.*; likewise *China*,, *Arn.*, *Carbo veg.*, *Puls.*, *Ipec.*, *Phosph. ac.*, *Nux v.*; more particularly for the **headache** caused by it, *Cocc.*, *Nux v.*, *Bry.*, *Puls.*; for the **nausea** or the gastric difficulties caused by the watching, *Cocc.*, *Ipec.*, *Puls.*, *Carbo veg.*; for the **sleeplessness** or the uneasy sleep caused by the watching, *Cocc.*, *China*, *Coff.*, *Laches.*; after a **night's revelry**, *Nux v.*, *Carbo veg.*, *Bry.*, *Puls.*, *Sulph.*, *Laches.*

4. **After loss of fluids** (venesection, profuse perspiration, etc.)—The chief remedy is, *China*; if insufficient, we may resort to *Phosph ac.*, *Sulph.*, *Sulph. ac.*, *Ars.*, *Nux vom.*, *Carbo veg.* and *Calc.* For **syncope** after great loss of blood, if *China* does not help sufficiently, *Ipec.*, *Ars.* and sometimes *Verat. alb.* may be given. If the **limbs** pain after the bleeding **as if bruised**, *China*, *Arn.*, *Ars.* are the remedies. If the weakness is accompanied by great **thirst**, *China*, *Arsen.* After excessive **nursing**, *Carbo veg.*, *China*, *Phos. ac.*

5. **After sexual excesses**, excessive seminal losses, etc.—Whatever good *China* may do for weakness after losses of blood, it is of very little use for the consequences of sexual excesses. The remedies truly useful in such cases are, *Phosph. ac.*, *Sulph.*, *Calc.*, *Con.*, *Nux v.*, *Cocc.* and *Carbo veg.* In other respects **natural** excesses are never as destructive to health as **unnatural** excesses; in the first place the former are after all limited to some extent to the utmost possibilities of the natural powers; and in the second place, sexual excesses are never indulged in at such a tender age as unnatural gratifications, such as self-abuse. Many physicians

frighten young people who are addicted to self-abuse, with **tabes dorsualis.** This is wrong; for considering the large number of young people who practice this vice in every country even at an early age, tabes dorsualis is comparatively a rare disease. That this disease may be caused by the long practice of onanism, is an established fact; I have often noticed a beginning of it in my own practice among young people whose legs had become affected with a certain unsteadiness of gait; I have likewise often observed a certain decrease of the mental faculties, of the power of thinking promptly, and above all, a certain melancholy and hypochondria, accompanied by despondency on account of ruined health, with great shyness and a certain anxiousness in their demeanor. All these symptoms often disappear without the assistance of art, provided the wretched habit is given up; what does not pass off of itself if such a result is once developed and which is really worse than any other symptom, is the **development of pulmonary tubercles,** which is favored by nothing more and in a more terrible manner than by this horrid abuse. In this city I have never yet treated a young man or girl of the age of 22 years for highly-developed pulmonary consumption, who had not been addicted to self-abuse; if such patients have a peculiar, lead-colored complexion, eyes that have lost all vivacity of expression, and reflect sensual thoughts and desires, and if they are at the same time troubled with a short, dry or racking cough, I never omit instituting a careful exploration of the lungs, after which I obtain the desired information either from the patients themselves or from their parents. The timely interference of art can do a great deal even for such patients; I do not entertain the remotest doubt that onanism is one of the chief causes why such a proportionally large number of young persons between the ages of 21 and 25 years die of tubercular consumption. If it is not too late to do anything in such cases, the remedies which I generally resort to, and in the same order as here stated, are, *Phosph. ac.*, *Sulph.*, *Calc.*, *Phosph.*, *Hepar*, *Silic.*, (see the chapters headed "Cough and Pulmonary Phthisis.") For the **melancholy** and **hypochondria,** and for the weakness of the lower extremities which often attack persons addicted to self-abuse, I give with good success, *Nux v.*, *Sulph.*, *Calc.*, in the order here mentioned. If, after taking *Calc.*, the patient continues to grieve over his health, I give *Phosph. ac.* or *Staphys.* If no perceptible bad effects have yet set in, and the

young people are incited to self-indulgence by frequent and continued erections and an excessive irritability and excitability of the parts, *Nux v.*, *Puls.*, *Silic.*, *Plat.*, *Sep.* are my remedies; if they are troubled with lascivious thoughts and fancies, *Carbo veg.*, *Merc.*, *China*, or if these remedies are not sufficient, *Calc.*, *Phosph.*, *Majorana*. If the patients are troubled with nocturnal emissions, for which *Nux v.*, *Sulph.* and *Calc.* are not sufficient, *Phosph. ac.*, *Conium*, *Sep.*, *Puls.*, *Carbo veg.* or *China.* generally help; [also *Digitaline* 2d tritur. H.] If, after the patient had been cured and had given up his bad habit for a long time, various derangements still remain which show themselves more particularly after sexual intercourse, I give for a **weakness** and **tired** and bruised feeling in the extremities, *Calc.*, *Cocc.* or *Silic.*; for **dullness** of the head, *Calc.*; for **mental exhaustion**, *Sep.*; **dyspnœa**, *Staphys.*, *Silic.* I always had the best effect from my remedies by giving two globules of the thirtieth attenuation dry on the tongue in a single dose, or two or three doses during the first week, and then awaiting the effect of the remedy for a couple of weeks. When given in form of a watery solution, they never seemed to have the same good effect.

6. **Exhaustion, prostration from exposure to heat.**—What *Bry.*, *Carbo veg.* and *Bell.* can do for headache from exposure to excessive heat; and *Bry.*, *Carbo veg.*, *Ant. cr.*, *Silic.*, *Lyc.*, for the **nausea** and gastric difficulties from a similar cause; *Bry.*, *Phosph. ac.* and *Sulph.* for the **diarrhœa**; *Bry.*, *Silic.*, *Sep.*, *Phosph.*, *Petrol.* and *Natr. carb.* for the weary and languid feeling caused by a thunderstorm, has been verified by others as well as by myself in hundreds of cases even during the last summer, when the heat was excessive beyond measure.

## 2. Colds.

1. **According to the different causes.**—The following remedies have proved efficient in these affections not only in my own practice, but likewise in that of other physicians. For a cold caused by exposure to **wet**, *Rhus t.*, *Puls.*, *Dulc.*, *Acon.*, *Calc.*; after **bathing** in a river, *Rhus t.*, *Calc.*, *Caust.*, *Ant. cr.*, *Sulph.*; after **working** in water, *Calc.*, *Puls.*, *Rhus t.*, *Sulph.*; the **head** getting **chilled**, *Bell.*, *Puls.*, *Acon.*, *Sep.*; the **feet** getting **wet**, *Puls.*, *Silic.*,

*Dulc.*, *Verat. alb.*, *Calc.*, *Sulph.*, *Rhus t.;* the **stomach** getting **chilled** by ice, ice-water, fruit, acids, *Ars.*, *Puls.*, *Carbo veg.*, *Bry.;* after **suppression** of the **perspiration,** *Cham.*, *Rhus t.*, *Bry.*, *Dulc.*, *China.*

2. **According to the consequences of taking cold.**—If an **eruption** had **receded** in consequence, *Ars.*, *Bry.*, *Ipec.*, *Dulc.;* if **headache** was caused by it, *Acon.*, *Ant. cr.*, *Bell.*, *Cham.*, *Dulc.;* **ophthalmic** difficulties, *Bell.*, *Hep.*, *Sulph.*, *Dulc.;* **otalgia,** *Cham.*, *Merc.*, *Puls.*, *Sulph.;* **buzzing** in the ears, *Acon.*, *Dulc.;* **prosopalgia,** *Acon.*, *Cham.*, *Coff.;* **toothache,** *Acon.*, *Cham.*, *Dulc.*, *Hep.*, *Merc.*, *Rhus t.*, *Sulph.;* **sore throat,** *Bell.*, *Dulc.*, *Merc.;* **gastric** complaints, nausea, vomiting, *Ant. cr.*, *Ars.*, *Bell.*, *Bry.*, *Carbo veg.*, *Cocc.*, *Dulc.*, *Ipec.;* **cardialgia,** *Ars.;* **colic,** *Cham.*, *Merc.*, *Sulph.;* **diarrhœa,** *Bry.*, *Cham.*, *Dulc.*, *Merc.*, *Nux v.*, *Puls.*, *Sulph.;* **suppressed catarrh,** *Bell.*, *China*, *Ipec.*, *Puls.*, *Sulph.;* **cough,** *Bry.*, *Carbo veg.*, *Cham.*, *Dulc.*, *Ipec.*, *Nux v.*, *Phosph. ac.*, *Puls.*, *Sulph.;* **respiratory difficulties,** *Ars.*, *Carbo veg.*, *Ipec.;* **pains** in the **chest,** *Carbo veg.*, *Acon.*, *Bry.;* pains **in the limbs,** *Acon.*, *Arn.*, *Bry.*, *Calc.*, *Cham.*, *Coff.*, *Dulc.*, *Hep.*, *Merc.*, *Phosph. ac.*, *Rhus t.*, *Silic.*, *Sulph.;* **fever,** *Acon.*, *Bell.*, *Cham.*, *Dulc.*, *Puls.;* **suppression** of the **menses,** *Acon.*, *Puls.*, *Cham.*, *Dulc.*, *Sepia*, *Bell.*, *China*, *Silic.*

3. **Liability to take cold.**—This tendency can be successfully treated, provided each remedy is allowed its full time of several weeks to exhaust its action in the organism; by this means I have more than once freed persons from such a liability, who were otherwise in a perfectly sound state of health, and therefore able to let each remedy have its full swing without its action being interrupted by a medicine that had to be given for some other more important pathological derangement. In the case of chronic patients who had confided themselves to my treatment, I have often accomplished the same purpose by selecting a remedy for their condition which had among its symptoms a disposition to take cold by the least exposure, more particularly *Calc.*, *Nitr. ac.*, *Silic.*, *Carbo veg.*, *Dulc.*, *Puls.*, *Rhus t.*, *Bell.*, *Coff.*, *Nux v.*, *China.* For colds from every **little current of air,** *Carbo veg.*, *Rhus t.*, *Verat. alb.*, *Bry.*, *Calc.*, *Cham.*, *Merc.;* for great sensitiveness **to wind,** *Lyc.*, *Sulph.*, *Carbo veg.*, *Sepia*, *Cham.*, *Laches.;* especially to **north wind,** *Sep.;* to a **draught of air,** *Bell.*, *Silic.*, *Sulph.*, *Calc.*, *Cham.;* to cool **evening air,** *Merc.*, *Sulph.*, *Carbo veg.*, *Nitr. ac.;* to **stormy** weather,

*Bry.*, *Silic.;* to **wet** and **cold** weather, *Calc.*, *Verat alb.*, *Carbo veg.*, *Rhus t.;* to every **change of weather**, *Silic.*, *Carbo veg.*, *Merc.*, *Sulph.*, *Calc.*, *Rhus t.*, *Verat. alb.*

4. **According to the seasons.**—For colds in the **spring**, the best remedies are *Rhus t.*, *Laches.*, *Verat alb.*, *Carbo veg.;* in the **summer**, *Bry.*, *Phosph. ac.*, *Carbo veg.*, *Dulc.*, *Sep.*, *Silic.;* in the **fall**, *Rhus t.*, *Verat. alb.*, *Dulc.*, *Merc.*, *Calc.*, *Bry.*, *China;* in **winter**, in dry and cold weather, *Bry.*, *Acon.*, *Bell.*, *Dulc.*, *Cham.*, *Nux v.*, *Sulph.*

### 3. Suppression of Eruptions, Ulcers and other Habitual Secretions.

1. **General remark.**—It is incredible what a legion of acute and chronic diseases originate in the sudden suppression of an acute or chronic exanthem, ulcer or habitual discharge, whether pathological, like coryza and leucorrhœa, or physiological, like hæmorrhoids, menses, secretion of milk, and the like. In many cases the diseases break out immediately after such a suppression, and it is quite easy to recognize the cause and to decide what remedies ought to be prescribed. Unfortunately, however, these diseases sometimes do not break out until years after; and although we may entertain a suspicion that the present disease is traceable to such a suppression which took place at some former period, yet we can never arrive at positive certainty regarding the necessary connection between the former condition and the present one, and hence must find it difficult to reach definite conclusions concerning the true cause and the remedies to be employed in combating it. It sometimes happens in the course of our treatment that the old pathological condition breaks out again with great relief to the patient and even accompanied by a simultaneous disappearance of the present disorder. For many years I have kept full notes not only of cases where the relation of cause and effect was clearly demonstrated by the final cure (as in the case of vertigo related in the chapter, headed "Vertigo"), but likewise of cases where the consequences appeared immediately after the cause had begun to act; from these notes I propose to make a few short extracts.

2. *a*, **Diseases according to the various causes.**—If the diseases were caused by the suppression of chronic **eruptions** or **ulcers**, the following remedies prove most efficient in my hands, *Ars.*, *Caust.*, *Graph.*, *Sulph.*, *Calc.*, *Lyc.*, *Silic.*, *Laches.*, *Cupr.;* after suppression of **acute exanthems**, *Cupr.*, *Bry.*, *Phosph.*, *Ars.*, *Apis.*, *Puls.*, *Sulph.*, *Bell.*, *Ipec.;* especially of **scarlet-rash**, *Bry.*, *Sulph.*, *Calc.*, *Phosph.*, *Phosph. ac.;* of **measles**, *Bry.*, *Phosph.*, *Puls.*, *Sulph.*, *Ars.;* of **erysipelas**, *Cupr.*, *Bry.*, *Apis*, *Bell.*, *Rhus t.;* of **urticaria**, *Apis*, *Ars.*, *Ipec.*, *Calc.*, *Lyc.;* of simple **rash**, *Bry.*, *Ipec.*, *Calc.*, *Lyc.;* for suppressed **catarrh**, *China*, *Bell.*, *Puls.*, *Sulph.*, *Bry.*, *Puls.*, *Nux v.;* after suppression of habitual **perspiration of the feet**, *Silic.*, *Cupr.*, *Baryt.*, *Ars.*, *Rhus t.*, *Sep.*, *Plumb.;* after suppression of **general perspiration**, *Acon.*, *Cham.*, *Rhus t.*, *Bry.*, *Sulph.;* after suppression of **hæmorrhoidal hæmorrhage**, *Acon.*, *Sulph.*, *Nux v.*, *China*, *Ars.*, *Calc.*, *Carbo veg.*, *Puls.;* after suppression of the **menses**, *Bry.*, *Puls.*, *Sulph.*, *Lyc.*, *Acon.*, *Sep.*, *Silic.;* after suppression of the **lochia**, *Rhus t.*, *Coloc.*, *Hyosc.*, *Nux v.*, *Plat.*, *Verat. alb.;* again, after suppression of **gonorrhœa**, *Puls.*, *Merc.*, *Aur.;* after cauterization of **chancres**, see my work on **Venereal Diseases**, (translated by Chas. J. Hempel, M. D., and published by W. Radde, 550 Pearl street, N. Y.)

3. *b*, **Consequences of such suppressions.**—If followed by **mental alienation**, *Bell.*, *Cupr.*, *Ars.*, *Caust.*, *Graph.;* if by **meningitis**, *Cupr.*, *Bell.*, *Bry.;* by chronic **vertigo**, *Sulph.*, *Calc.*, *Caust.*, *Phosph.;* by **headache**, *Sulph.*, *Bell.*, *Bry.*, *Calc.*, *Ars.*, *Nux v.*, *Laches.;* **affections of the eyes**, *Sulph.*, *Calc.*, *Merc.*, *Hep.*, *Rhus t.*, *Ars.*, *Bell.*, *Euphr.*, *Puls.*, *Laches.*, *Nitr. ac.;* by **gastric difficulties**, *Sulph.*, *Puls.*, *Nux v.*, *Laches.*, *Ars.*, *Hep.*, *Silic.*, *Carbo veg.;* chronic **pains in the abdomen**, *Sulph.*, *Ars.*, *Calc.*, *Phosph.*, *Coloc.*, *Bell.;* **liver-complaint**, *Lyc.*, *Laches.*, *Bry.*, *Bell.;* **diarrhœa**, *Sulph.*, *Calc.*, *Rhus t.*, *Ars.*, *Phosph.*, *Bry.*, *Phosph. ac.*, *Nitr. ac.*, *Petrol.;* **urinary difficulties**, *Puls.*, *Nux v.*, *Acon.*, *Lyc.*, *Dulc.*, *Ars.;* **dyspnœa**, *Ars.*, *Ipec.*, *Laches.*, *Sulph.*, *Silic.*, *Cupr.*, *Puls.*, *Phosph.;* **pulmonary affections**, *Bry.*, *Phosph.*, *Sulph.*, *Calc.*, *Merc.*, *Nitr. ac.*, *Hep.*, *Silic.*, *Ars.;* **paralytic conditions**, *Caust.*, *Dulc.*, *Sulph.*, *Rhus t.*, *Alum.*, *Acon.*, *Calc.*, *Baryt.;* **epilepsy**, *Sulph.*, *Calc.*, *Caust.*, *Ars.*, *Silic.*

### 4. Emotions.

1. **General Remark.**—It is a well-known fact that not

only a sudden fright, an unexpected joy, etc., but likewise sorrow, grief, chagrin, anger etc. may occasion the most violent acute diseases as well as the most chronic affections. For this reason I never fail to inquire into the anamnestic circumstances of every case with minute attention, in order to find out whether the patient is constantly under the influence of grief or continual paroxysms of passion. The treatment of a chronic disease may drag on for years unless we first endeavor to control this internal enemy by specific remedies, and to fortify the patient's nervous system for the struggle with the outer world. Although I have taken every opportunity, in the previous chapters of this work, when treating of the different diseases, of mentioning the remedies that are particularly adapted to morbid phenomena caused by emotions, yet this subject has seemed to me of sufficient importance to deserve a concise arrangement of the different remedies which I have ascertained in my practice to possess a special curative bearing upon this subject.

2. **According** to the **different Emotions.**—For the consequences of **fright** and fear I have always employed with the best success, *Acon.*, *Ignat.*, *Bell.*, *Opium*, *Verat. alb.*, *Hyosc.*, *Laches.;* for the consequences of extreme, sudden **joy,** *Coff.*, *Acon.*, *Crocus*, *Op.;* for the consequences of **chagrin,** *Cham.*, *Staphys.*, *Ignat.*, *Bry.*, *Cocc.*, *Coloc.*, *Nux vom.*, *Phosph.*, and if accompanied by a violent **ebullition of anger,** *Bry.*, *Acon.*, *Cham.*, *Nux vom.*, *Phosph.;* if by a fit of **indignation,** *Staphys.*, *Coloc.;* if by internal **mortification,** *Ignat.*, *Puls.*, *Plat.;* for the consequences of **grief, sorrow** and care, *Phosph. ac.*, *Caust.*, *Ignat.*, *Laches.*, *Graph.*, *Arsen.*, *Lyc.;* for the consequences of **insulted feelings,** *Puls.*, *Plat.*, *Staphys.*, *Coloc.;* of **unhappy love,** *Phosph. ac.*, *Ignat.*, *Hyosc.*, *Staphys.*, *Aur.*, *Puls.*, and if accompanied by a good deal of **jealousy,** *Hyosc.*, *Laches.*, *Puls.;* for the consequences of **homesickness,** *Caps.*, *Merc.*, *Phosph. ac.*, *Dros.*

3. **According** to the consequences of **emotions.**—The most reliable remedies in such cases are, if the emotion is succeeded by **mental derangement,** *Bell.*, *Hyosc.*, *Laches.*, *Opium*, *Stram.*, *Verat. alb.;* attended with continual **screams,** *Bell.*, *Op.;* with constant **anxiety** and **fear,** *Bell.*, *Acon.*, *Merc.*, *Cham.*, *Plat.*, *Verat. alb.;* with extreme **fretfulness** and impatience, *Staphys.*, *Coloc.;* with **melancholy** sadness, *Aur.*, *Ignat.*, *Puls.*, *Phosph. ac.*, *Plat.*, *Cocc.*, *Caust.*, *Lyc.;* with constant **crying,** *Puls.*, *Bell.*, *Plat.*, *Hep.*, *Natr. mur.*, *Sulph.;*

if succeeded by **loss of consciousness**, stupefaction, *Op.*, *Hyosc.*, *Bell.*, *Nux vom.;* if by **sopor**, drowsiness, *Op.*, *Puls.*, *Croc.*, *Bell.*, *Samb.*, *Phosph. ac.;* if by **sleeplessness**, *Sulph.*, *Coff.*, *Acon.*, *Staphys.*, *Merc.*, *Coloc.*, *Caps.;* by nervous **excitement**, *Acon.*, *Coff.*, *Nux vom.*, *Merc.;* **headache** from rush of blood, *Bell.*, *Op.*, *Nux vom.*, *Acon.*, *Merc.*, *Coff.*, *Ignat.*, *Sulph.;* **gastric** complaints (loss of appetite, nausea, vomiting etc.), *Cham.*, *Puls.*, *Bry.*, *Ignat.*, *Coloc.*, *Nux vom.;* **bilious** complaints, *Cham.*, *Bry.*, *Acon.*, *Coloc.*, *Staphys.*, *Ignat.;* **pains in stomach**, *Cham.*, *Nux vom.*, *Puls.*, *Ignat.;* **colic** and **diarrhœa**, *Cham.*, *Puls.*, *Verat. alb.*, *Coloc.*, *Phosph.*, *Phosph. ac.;* **involuntary** stools, *Verat. alb.*, *Hyosc.*, *Op.;* **respiratory** difficulties, *Samb.*, *Op.*, *Bell.*, *Nux vom.*, *Cham.*, *Ars.;* **palpitation of the heart**, *Acon.*, *Puls.*, *Hep.*, *Op.*, *Cham.*, *Ars.;* **rush of blood**, *Acon.*, *Coff.*, *Merc.;* **jaundice**, *Merc.*, *China*, *Cham.*, *Acon.;* **debility** with trembling, *Verat. alb.*, *Coff.*, *Op.*, *Ignat.;* **spasms** and convulsions, *Ignat.*, *Cham.*, *Bell.*, *Hyosc.*, *Op.;* **epilepsy**, *Ign.*, *Caust.*, *Bell.*, *Laches.*, *Op.;* **fever**, *Acon.*, *Bry.*, *Cham.*, *Merc.*, *Puls.*, *Nux vom.*, *Ignat.*, *Phosph. ac.*, *Staphys.;* with **chills** and shuddering, *Puls.*, *Merc.*, *Bry.;* with **coldness** of the body and limbs, *Verat. alb.*, *Puls.*, *Op.*, *Samb.;* with **heat**, *Acon.*, *Bry.*, *Cham.*, *Nux vom.;* with **flushes** on the cheeks, *Acon.*, *Caps.*, *Ignat.;* with profuse **night-sweats**, *Phosph. ac.*, *Merc.;* **hectic** fevers, *Phosph. ac.*, *Ignat.*, *Cocc.*, *Staphys.*, *Caps.*

4. **Excessive sensitiveness of the feelings,** emotions are too easily excited. The best remedies for an extreme **tendency to start** and even at the least trifle, are, *Ign.*, *Bell.*, *Nux v.*, *Borax*, *Caust.*, *Laches.*, *Sulph.*, *Sep.;* for **irritable temper** and a disposition to take every thing in bad part, *Acon.*, *Bry.*, *Calc.*, *Caust.*, *Carbo veg.*, *Staphys.*, *Ars.*, *Caps.*, *Lyc.*, *Nitr. mur.*, *Nux vom.*, *Phosph.*, *Sulph.;* for an **irascible** mood, *Bry.*, *Ars.*, *Ipec.*, *Cham.*, *Caust.*, *Aurum*, *Carbo veg.*, *Nux v.*, *Petrol.*, *Phosph.*, *Sulph.;* for a **quarrelsome**, irritable, censorious mood, *Ars.*, *Caust.*, *Bell.*, *Cham.*, *China.*, *Hyosc.*, *Laches.*, *Lyc.*, *Merc.*, *Verat. alb.*, *Nux vom.*, *Arn.*, *Sep.;* for **excessive sensitiveness** to pain, being beside one's self, *Acon.*, *Cham.*, *Coff.*, *Nux v.*, *Puls.*, *Veratr. alb.*, *Ign.*, *Lyc.*, *Phosph.*, *Phosph. ac.*, *Silic.*, *Graph.*, *Ars.*, *Merc.*, *China.* If, in chronic diseases, we can find, among the above list of remedies, one or the other corresponding with the patient's other ailments, such a remedy, in chronic as well as in acute diseases, will not only prove an efficient means of relief for the present complaint, but, if the continued improvement of the patient should permit of its being allowed to act for some

weeks without being interfered with by some other medicinal agent, will not indeed transform a lively character into a phlegmatic one, or a coward into a bold and brave champion, but will diminish the liability of the characterial weakness to being excited into manifestations by the most trifling circumstances. A careful attention to the character and disposition of the patient is one of the great secrets why those who faithfully heed Hahnemann's teachings, sometimes achieve much better cures than those who, prompted by the spirit of fault-finding, know a great deal better than Hahnemann, and deem it an honor to do differently from what has been taught by the great master of the healing art. Since they cannot give their doses big enough, I advise them to try the effects of an ounce of Arsenic or of the bite of the Lachesis Triganocephalus.

## 5. Medicinal Diseases.

1. **Mercurial Cachexia.**—Since even the allopaths have discontinued Mercury in syphilitic diseases, or, at any rate, prescribe it in much smaller doses than formerly, mercurial cachexia likewise occurs much less frequently than at former periods. I too have witnessed high degrees of mercurial cachexia not only after allopathic, but likewise after a so-called homœopathic treatment. I hold now in my hands a prescription by one of our men of progress who ordered one hundred grains of Calomel to be taken by a miserable patient who had already for a long time been afflicted with mercurial syphilis. Of course the poor man came to me in a most horrid condition. I have found the following remedies most appropriate for mercurial cachexia. For affections of the **mouth** and **gums**, (aphthæ, ulcers,) *Carbo veg.*, *Hep.*, *Dulc.*, *Staphys.*, *Nitr. ac.*, *Thuja;* for **ptyalism**, *Dulc.*, *Kali hydriod.;* for **mercurial angina**, *Arg.*, *Laches.*, *Lyc.*, *Carbo veg.*, *Hep.*, *Nitr. ac.*, *Thuja.;* for inflammation or ulceration of the Schneiderian membrane, *Aurum;* for **mercurial ulcers**, *Aurum*, *Hep.*, *Phosph. ac.*, *Carbo veg.*, *Silic.*, *Laches.*, *Sarsap.*, *Lyc.*, *Ferr.*, *Nitr. ac.;* for **buboes**, glandular affections, *Aur.*, *Dulc.*, *Carbo veg.*, *Silic.;* for **osseous** diseases (exostoses, caries, etc.), *Aur.*, *Kali hydriod.*, *Phosph. ac.*, *Calc.*, *Stap.*, *Silic.*, *Asa fœtida;* for **pains** in the **limbs**, *Carbo veg.*, *China*, *Hep.*, *Sarsap.*, *Guaiac.*, *Thuja.*, *Nitr. ac.*, for nervous **debility**, *Kali hydriod.*, *Aur.*, *Carbo veg.*, *Ferr.*, *Hepar*, *Nitr. ac.;* for acute **hydrargyria**, *Kali*

*hydriod.;* for **melancholy** with inexpressible bodily and mental agony, *Aur.*, *Hep.;* for the excessive **tendency to take cold,** excessive sensitiveness to every change in the weather, *Carbo veg.*, *Dulc*, *Silic.*, *China.* If the use of Mercury had only been discontinued for a year, I give *Aur.*, *Hep.*, *Kali hydriod.*, which I prefer to all other remedies, two or three doses of the second trituration, giving all the other remedies in form of a watery solution, two pellets of the thirtieth attenuation. If Mercury had been discontinued longer than a year I likewise give the above-mentioned three remedies in water like any other. Even in the worst cases, three to four doses of *Kali hydriod.*, *Aur.* and *Hep.* have sufficed in my hands to ameliorate the condition of the patient a good deal and in a very short time; although in order to extirpate even the last vestige of this cachexia and to guard the patient fully against the return of bone-pains and pains in the limbs, and against the breaking out of new, although trifling eruptions, and of aphthæ that disappeared again without treatment, I had to interfere repeatedly, for two or three years in succession, against this morbid disposition that had almost become a second nature.

2. **China-cachexia.**—This occurs quite frequently even at the present day among persons that had been treated allopathically for fever and ague with large doses of *Quinine.* In such cases I accomplish a great deal even with *Ipec.* 30th, two globules in watery solution; in former times I gave the sixth attenuation. If fever is still present, I give beside *Ipec.*, according to circumstances, *Arn.*, *Ars.*, *Carbo veg.*, *Verat. alb.*, *Fer.*, *Laches.*, *Puls.*, *Natr. mur.;* in case *Ipec.* is not sufficient, I give more particularly *Arn.*, if the patient complains of great lassitude with drawing in the bones and increased sensitiveness of the organs to motion, talk, noise. For **headache,** I give *Bell.*, *Calc.*, *Nux vom.*, *Natr. mur.;* for **pains** in the **face,** *Bell.*, *Nux vom.*, *Merc.;* for **otalgia,** *Puls.*, *Merc.*, *Calc.;* for **toothache,** *Bell.*, *Puls.*, *Calc.*, *Nux vom.;* for **splenetic stitches,** *Arn.*, *Ars.*, *Caps.*, *Fer.*, *Carbo veg.*, *Verat. alb.*, *Bell.;* for **gastric derangements,** *Ipec.*, *Puls.*, *Carbo veg.;* for **liver-complaint,** *Ars.*, *Fer.*, *Bell.*, *Merc.*, *Lyc.*, *Nux vom.;* for **jaundice,** *Merc.*, *Bell.;* for chronic **constipation,** *Verat. alb.*, *Laches.*, *Natr. mur.*, *Nux v.;* for **diarrhœa,** *Ipec.*, *Fer.*, *Ars.*, *Verat. alb.;* for **respiratory difficulties,** *Ipec.*, *Ars.*, *Carbo veg.*, *Laches.;* for **cough,** *Ipec.*, *Ars.;* for pains in the limbs, **rheumatism,** *Arn.*, *Puls.*, *Calc.;* for **œdema** of the feet, *Fer.*, *Ars.;* for **dropsy,** *Fer.*, *Ars.*, *Rhus t.*, *Hell.;* for **coldness** of the

body, with cold perspiration, *Ipec.*, *Verat. alb.*, *Ars.;* for disturbed sleep, *Bell.*, *Laches.*, *Natr. mur.*

3. **Complaints caused by other drugs.**—The chief routine-remedy which French physicians, as well as some German homœopathists of the Specific School, prescribe for almost all their patients, is *Iodine* in its various forms, the consequences of the abuse of which are mostly met by *Phosph.*, *Hepar*, *Ars.* or *Merc.* and likewise *Sulph.;* even small doses of a watery solution of two globules of the 30th attenuation are sufficient for this purpose. As regards the abuse of Rhubarb and Magnesia, I have so far only noticed it in English families; the consequences of the former I have generally succeeded in removing by means of *Puls.*, *Cham.* or *Merc.*, and the latter by means of *Cham.*, *Puls.*, *Rhubarb* or *Ars.* The eruptions which come out after the abuse of *Sulph.* or after the use of the Enghien Sulphur-baths, most commonly yield to *Merc.* or *Puls.*, and sometimes to *Ars.* or *Sep.* Young girls who have swallowed a good deal of iron, and, by so doing, have increased their chlorotic symptoms and have even brought themselves to the verge of consumption, and who do not improve under the use of *China* and *Puls.*, are sometimes helped by *Plumb.* and *Ars.* As regards *Digit.* which, when given in massive doses for cardiac diseases, intensifies them until they are rendered incurable, and which is even recommended by homœopaths (see Rueckert) in large doses, I am unacquainted with any remedy that will counteract its effects, provided *Ars.*, *Phosph.* or *Glonoine* are insufficient for such a purpose. The same remark applies to some extent to the abuse of *Opium*, the chronic effects of which, if not relieved by *Bell.*, *Merc.* and *Nux v.*, may still yield to *Plumb.* or *Alum.* For the abuse of lead-ointments *Alum.* sometimes affords speedy and efficient help, not to speak of the known antidotes *Opium*, *Bell.*, *Nux v.*, *Plat.*

4. **Abuse of medicinal articles of diet.**—Although it is true that in the long run the human organism can become used to many substances, such as coffee, tea, tobacco etc., which are not by any means destitute of medicinal qualities, yet these substances may manifest their noxious effects, if they are used by persons who had never used them before, or abused by those who had been accustomed to use them in moderation. If the abuse of coffee causes sleeplessness, the remedies are *Acon.* or *Nux vom.*,

[also *Opium.* II.]; if it causes **anxiety,** *Acon., Ignat., Cham., Nux v.;* if **vertigo,** *Cham., Nux v.;* **headache,** *Ignat., Nux v.,* or *Arn.;* **toothache,** *Ignat., Cocc., Nux v., Merc., Bell.;* **cardialgia,** *Ignat., Nux v., Cham., Cocc.;* **vomiturition,** *Nux v., Cham.;* pains as if **inguinal hernia** would set in, *Cocc., Nux v.;* **colic,** *Cham., Ignat., Merc., Bell., Coloc., Nux v.;* for **sleeplessness caused by green tea,** *Coff.;* for a general feeling of **prostration** from the same cause, *China, Fer.;* for **pain** in the **stomach,** *Fer.;* for **nausea** or **vomiting** caused by **smoking,** *Ipec., Phosph., Ignat., Puls., Nux v.* or *Cocc.;* for **vertigo** from a similar cause, *Nux v., Cocc., Silic.;* for **heartburn,** *Puls., Staphys.;* for **hiccough,** *Puls., Ign.;* for **palpitation of the heart,** *Phosph., Puls.;* for **toothache,** *Bry., China, Ignat.*

### 6. Poisoning.

**General remark.**—So far I have only met with one real case of poisoning, which I would not relate, if it did not furnish another proof of the impropriety of doing away with old well-established pathological forms for the purpose of incorporating or subordinating them to some more recent pathological category. Ever since trichiniasis has become an object of pathological inquiry in Germany, and hundreds of victims have been sacrificed upon the altar of this new disease, every pathologist looks upon a poisoning by spoiled pork-sausages as a trichinæ trick, and the sausage-poison which used to occupy such a high rank in pathological series, has been banished as useless rubbish from the high lecture-rooms of Universities to find a last refuge among nursery-tales. This terrible mistake has not been without its sad consequences. Even here in Paris a whole family of five persons not long ago fell victims to this theoretical self-delusion in less than 24 hours. Father, mother and children had scarcely eaten a well-tasting meat-pie, when all present were attacked by all the symptoms that denote a genuine case of poisoning: violent pains in the stomach and bowels, constant vomiting, etc. The cry was raised that the pie had been prepared in copper vessels, inquiries were instituted in the shop of the pastry-cook who, although nothing poisonous was found in his place, was conducted to prison because the poisoned individuals died one after the other under the absurd treatment conducted in accordance with the rules of Old-School pathlology. While the poor man was sitting in his dungeon, and

another careful examination of his utensils showed nothing objectionable, the professors of chemistry and medicine fell foul of the ejecta and of the remnants of the pie, where they did not find a trace of trichinæ, arsenic, copper or of any other poison, but discovered after a careful microscopical examination, a multitude of small fungi, which they were as yet unable to classify, but which, they asserted, might, under the concurrent influence of a variety of as yet unknown circumstances, shoot up over night in hacked meat which, although otherwise sound, had been standing from 24 to 48 hours. The poor pastry-cook was set free, and, this being the end of the thing, nobody cared about the fungi or how they originated; in short, nothing else was done about the case, which was regarded as an absolutely accidental, unique and unaccountable fact. Nevertheless another similar occurrence took place some time after in my own house, the patients being my door-keeper and her daughter. Both had eaten six hours previous of a meat-pie (the meat for such pies is always from 24 to 48 hours old), when both were attacked by the most horrid pains in the stomach and bowels, and had to vomit until blood came. Copper vessels were again accused, but the police was fortunately not sent for because the pastry-cook was on friendly terms with these people. The symptoms being very much like those of the former case of poisoning, and the fungi being still fresh in my imagination, I ordered the patients to drink quantities of **black coffee.** The stupefaction, pains and vomiting abating after the use of this beverage, I prescribed *Ipec.* in watery solution, a teaspoonful every half hour. This completed the cure and next morning the poisoned individuals were quite well. During this tumult the husband, who had been working in some office, returned home and carried the remnants of the pie to an apothecary with a view of having them examined chemically. The apothecary not discovering any trace of mineral poison in the pie and not thinking of fungi, threw the pie away, so that I was unable to obtain any of it. Inasmuch as we never have any trichinæ in this city, and the symptoms of trichiniasis are very different from those which characterized these two cases of poisoning, it follows as an unavoidable consequence that sausages can cause poisonous symptoms and that the old belief in sausage-poison is, after all, founded upon the facts of reality.

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# ERRATA.

| | | | | | |
|---|---|---|---|---|---|
| Page 14, | line 25, | read suggestions, | instead of suggestions ; |
| " 17, | " 19, | " hæmorrhages | " hœmorrhages |
| " 18, | " 2, | " physician | " physican |
| " 20, | " 13, | " the | " its |
| " 21, | " 18, | " these | " thesc |
| " 24, | " 36, | " character | " characters |
| " 32, | " 17, | " fantasias | " phantasias |
| " 33, | " 13, | " henceforward | " henceforwards |
| " 38, | " 34, | " potu | " portu |
| " 40, | " 33, 34, | " disposition | " dispositions |
| " 42, | " 12, | " subsequently | " subsequent |
| " 43, | " 6, | " does | " do |
| " 51, | " 12, | " in removing | " to remove |
| " 51, | " 13, | " improving | " to improve |
| " 52, | " 27, | " apoplectic | " apopletic |
| " 58, | " 34, | " irritated | " irrirated |
| " 64, | " 13, | " rheumatism, | " rheumatism |
| " 69, | " 38, | " afforded | " affords |
| " 79, | " 19, | " remains some | " remains |
| " 81, | " 1, | " 4. Ophthalmic | " Ophthalmic |
| " 86, | " 14, | " affects | " effects |
| " 106, | " 23, | " remedies | " remsdies |
| " 112, | " 4, | " lancing | " glancing |
| " 118, | " 17, | " kinds | " kind |
| " 131, | " 7, | " Lyc.: | " Lyc., |
| " 139, | " 25, | " manifested | " manifest |
| " 141, | " 3, | " weapons | " arms |
| " 144, | " 8,18,16,20,26, | " mucous | " mucus |
| " 159, | " 16, | " as | " 1 |
| " 170, | transfer the words [Heloine and Cochineal are excellent remedies in the first stage of Bright's disease. H.] in the 4th & 5th lines, to the 18th line on same page. | | |
| " 171, | line 5, | read Hempel | instead of Hemple |
| " 171, | " 7, | " Orchitis | " Orthritis |
| " 184, | " 20, | " sphere; | " sphere, |
| " 193, | " 8, | " racemosa | " racomosa |
| " 203, | " 40, | " continue | " continuing |
| " 216, | " 13, | " rales | " rates |
| " 221, | " 4, | " resulting | " results |
| " 228, | " 12, | " abdomen, | " abdomen; |
| " 231, | " 2, | " of | " in |
| " 232, | " 11, | " Ischias | " Ischius |
| " 233, | " 19, | " produced | " produce |
| " 243, | " 32, | " cough, before or | " cough, or |
| " 248, | " 5, | " Saccharum | " Sacharum |
| " 252, | " 37, | " consideration. With | " consideration, with |
| " 259, | " 28, | " simultaneously | " simultaneous |
| " 260, | " 32, | " were | " were even |
| " 260, | " 33, | " and | " but |
| " 263, | " 10, | " faucium | " facecium |
| " 264, | " 6, | " cold, | " cold |
| " 273, | " 8, | " cone | " core |
| " 276, | " 14, | " 6 | " 5 |
| " 277, | " 9, | " Acne | " Acme |
| " 281, | " 18, | " carbuncle | " carbuncles |
| " 289, | " 3, | " I. Dry Injuries. | " Dry Injuries. |
| " 305, | " 2, | " spleen, and | " spleen and |
| " 305, | " 19, | " extremities | " extremeties |
| " 308, | " 7, | " nervosa | " nervoso |
| " 311, | " 12, | " beats | " heats |
| " 315, | " 32, | " of | " of the |
| " 319, | " 16, | " extremities | " extremeties |
| " 320, | " 17, | " brown, bloody | " brown bloody |
| " 320, | " 18, | " odor | " ordor |
| " 320, | " 18, | " diarrhœic | " diarrhœa |
| " 322, | " 20, | " dry, | " dry |
| " 322, | " 39, | " Ars. | " Ars., |
| " 334, | " 33, | " treatment | " treatments |
| " 335, | " 21, | " progress: | " progress, |
| " 336, | " 24, | " cases, | " cases |
| " 337, | " 8, | " filiform | " piliform |
| " 340, | " 18, | " trachea | " tracheæ |
| " 343, | " 25, | " by | " with |
| " 349, | " 2, | " are | " were |

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